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A study of battered women utilizing the California Psychological Inventory-Revised, the Myers-Briggs Type Indicator, the Constructive Thinking Inventory and the demographic variable of "times previously separated"

Martha Miller Grenier

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Grenier, Martha Miller, Ed.D.

The College of William and Mary, 1992

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U·M·I

**300 N. Zeeb Rd.
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A STUDY OF BATTERED WOMEN
UTILIZING
THE CALIFORNIA PSYCHOLOGICAL INVENTORY-REVISED
THE MYERS-BRIGGS TYPE INDICATOR
THE CONSTRUCTIVE THINKING INVENTORY
and the
DEMOGRAPHIC VARIABLE OF "TIMES PREVIOUSLY SEPARATED"

A Dissertation
Presented to
The Faculty of the School of Education
The College of William and Mary

In Partial Fulfillment
Of the Requirements for the Degree
Doctor of Education

by
Martha M. Grenier

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DEDICATION

This dissertation is dedicated with love and gratitude to my family. To my husband, Don, who has truly been the wind beneath my wings, and without whose love and support this goal would never have been possible.

To my children, Cathy, Jeff, and Michelle, who have inspired me with the courage they have displayed in their own heroic journeys.

To my Mom and Dad for their encouragement and support.

To my sister, my friend, who has kept me supplied with love and laughter my whole life.

This dissertation is also dedicated to the women who somehow find the courage to survive their shattered dreams.

TABLE OF CONTENTS

	Page
Acknowledgements.....	vii
List of Tables.....	viii
Abstract.....	ix
Chapter	
I The Problem.....	2
Justification for Study.....	2
Purpose of the Study.....	4
Theoretical Rationale.....	5
Definition of Terms.....	9
Research Hypotheses.....	9
Population of Sample.....	10
Data Gathering.....	11
Procedure.....	11
Instruments.....	11
Ethical Considerations.....	12
Limitations of the Study.....	13
II Review of Literature.....	15
Development of Theoretical Concept.....	15
Critique.....	29
Historical Review of Literature on the Abuse of Women.....	30

	Review of Recent Literature on Characteristics of This Population.....	38
	Critique.....	47
	Descriptive Variable: California Psychological Inventory-Revised.....	48
	Critique.....	55
	Descriptive Variable: Myers-Briggs Type Indicator.....	57
	Critique.....	62
	Demographic Variable: Times Previously Separated.....	63
	Critique.....	65
	Supplementary Research: The Constructive Thinking Inventory.....	65
	Inferences from this Study.....	76
	Relation of Research to the Problem.....	76
III	Collection of Data.....	78
	Population and Selection of Sample.....	78
	Descriptive Variables.....	78
	Data Gathering.....	78
	Measurement Instruments.....	79
	Demographic Data.....	79
	California Psychological Inventory-Revised.....	79
	Myers-Briggs Type Indicator.....	81
	Research Design.....	84
	Specific Hypotheses.....	86
	Statistical Procedure.....	86
IV	Statistical Analysis.....	87
	Results of First Research Hypothesis.....	87

	Results of First Research Hypothesis.....	87
	Results of Second Research Hypothesis.....	88
	Results of Third Research Hypothesis.....	89
	Results of Fourth Research Hypothesis.....	90
V	Analysis of Data.....	94
	First Research Hypothesis.....	95
	Second Research Hypothesis.....	99
	Third Research Hypothesis.....	101
	Fourth Research Hypothesis.....	105
	Suggestions for Furture Research.....	109
	Appendix A.....	113
	Appendix B.....	114
	Appendix C.....	115
	Bibliography.....	116
	Vita.....	126

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LIST OF TABLES

TABLE 1	
Thinking/Feeling Function.....	88
TABLE 2	
California Psychological Inventory - Revised.....	89
TABLE 3	
Constructive Thinking Inventory Group Means.....	90
TABLE 4	
Times Previously Separated.....	91
TABLE 5	
Variable Results by Case Number for Return Group.....	92
TABLE 6	
Variable Results by Case Number for Nonreturn Group..	93
TABLE 7	
Distribution of MBTI Preferences by Populations.....	96
TABLE 8	
Thinking/Feeling Table of Frequencies.....	98
TABLE 9	
Constructive Thinking Inventory Group Means.....	102

A STUDY OF BATTERED WOMEN
UTILIZING
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ABSTRACT

The problem of most shelters is that they have very limited resources. In addition, space is at a premium in most shelters. Optimum employment of these limited resources is paramount. Since leaving the abusive relationship appears to be a process, it would be extremely useful to shelter managers and counselors alike if there were a way to ascertain which women were ready to leave the abusive relationship and which women were not.

Using the scales of Dominance, Independence, and Feminine/Masculine from the California Psychological Inventory - Revised (CPI-R), the scales of Emotional Coping, Behavioral Coping, and Naive Optimism from the Constructive Thinking Inventory, the Thinking/Feeling Preference from the Myers-Briggs Type Indicator, and the demographic variable of

"times previously separated," a study was conducted to see if distinctive patterns would arise between those women who chose to return to the abuser and those women who chose not to return to the abuser.

Fifty shelter residents were asked to participate by completing three inventories and a demographic information sheet.

T-tests were used to analyze the data.

The first hypothesis was that women who preferred the Feeling function in their Myers-Briggs Type Indicator would return to the abuser to a greater degree than those who preferred the Thinking function. This hypothesis was not supported.

The second hypothesis was that women who did not return to the abuser would score significantly higher on the California Psychological Inventory - Revised scales of Dominance and Independence and lower on the Femininity/Masculinity scale. This hypothesis was not supported.

The third hypothesis was that women who chose not to return to the abusive relationship would score significantly higher on the scales of Emotional Coping and Behavioral Coping and lower on the scale of Naive Optimism. The hypothesis was supported for the scales of Emotional and Behavioral Coping and rejected for the scale of Naive Optimism.

The fourth hypothesis was that women who had previously separated from their partners zero, one, or two times would return to a significantly greater degree than those who had previously separated three or more times. This hypothesis was not supported.

This research was based upon the multimodal theory of Arnold Lazarus. Findings indicated that the decision to return or not return was a decision impacted by a combination of many variables unique to the individual woman.

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CHAPTER I

The Problem

Justification for Study

The Figgie Report, a national survey conducted to assess the fear of crime, reported that four out of five Americans are afraid of being assaulted, robbed, raped, or murdered. Nine out of ten Americans keep their doors locked (Gelles and Straus, 1988).

The fear is based on reality. The Department of Justice reported that three Americans in one hundred are victims of crime each year. This is six million people annually. According to the Figgie Report, a significant number of people stated that they did not go places or do certain things because of concerns about their personal safety. The cruel irony is that you are more likely to be physically assaulted, beaten, and killed in your own home at the hands of a loved one than anyplace else, or by anyone else in our society (Gelles and Straus, 1988).

Estimates of the numbers of women being battered by loved ones vary considerably. FBI statistics indicate that a wife is beaten in this country every 15 seconds. This adds up to more than one million women battered annually (Stacey and Shupe, 1983). Nationally, battery is the single greatest

cause of injury to women, exceeding rape, muggings by strangers, and automobile accidents combined. In Virginia alone, from July 1, 1986, to July 1 1987, 14,642 adults requested spouse abuse service (VADV Statistics).

In response to this compelling demand for services that has been generated by the spouse abuse dilemma, over one thousand shelters for battered women and their children were in operation across the country in 1988 (Gelles and Straus, 1988). One reason for studying women in shelters is that increasingly the public is being asked to fund these shelters. The monies come in the form of tax dollars or in the form of grants from agencies such as United Way. Either way, the public has the right to know that its money is being used effectively.

A second reason for this study was to search beyond a collection of characteristics of battered women such as that they are rigid, masochistic, or self-defeating. This investigative study attempts to increase understanding of battered women by discovering how they approach their world cognitively, emotionally, and socially.

It is important to gain a more in-depth understanding of women who seek shelter services because if they decide to return to the abusive relationship, their decision has far-reaching ramifications. Shelters provide them temporary havens but cannot provide long term solutions. Moreover, when they return to the abusive relationship, the police,

paramedics, emergency room services, and the courts are used repeatedly by these same women.

The damage is not restricted to the women themselves. It extends to their friends and families. More importantly, the literature on child abuse supports the fact that domestic violence tends to be intergenerational (Straus, Gelles, & Steinmetz 1980). The devastating effects of domestic violence will begin to cease only after a more complete understanding of the battered woman is obtained. Only then can effective therapeutic interventions be initiated.

Purpose of the Study

The problem of most shelters is that they have very limited resources in terms of counselors available for counseling and funds available to help the woman make a new start in life. In addition, space is at a premium in most shelters. Optimum employment of these limited resources is paramount. Since leaving the abusive relationship, in most cases, appears to be a process, it would be extremely useful to counselors and managers of shelters alike if there were a way to distinguish between those who are ready to leave the abusive relationship and those who are not ready to leave. If distinctive patterns could be recognized then limited resources could be allocated to those ready to leave, and more effective counseling can be given to those who are not ready to leave. Using the California Psychological Inventory - Revised (CPI-R), the Constructive Thinking Inventory (CTI),

the Myers-Briggs Type Indicator (MBTI), and one demographic variable (the number of times she has previously separated from the batterer) the purpose of this study was to investigate whether or not there was a combination of main effects which could predict which women would return to the battering relationship and which women would not return.

Theoretical Rationale

The research undertaken for this dissertation is based on the multimodal approach of Arnold A. Lazarus. "The multimodal therapist asks: Who or what is best for this particular individual? The approach is personalistic and individualistic" (Lazarus, 1981, p.4).

Multimodal therapy (MMT) is perhaps best described as systematic eclecticism. In the clinical area, rigid adherents to particular schools have receded into the minority (Garfield and Bergin, 1986). Practitioners today employ a diverse range of methods and techniques in working with clients. To be effective, a therapist has to be flexible, versatile, and technically eclectic. Technical eclecticism implies using many techniques drawn from different sources without also subscribing to the disciplines or theories that generated them. One may use gestalt techniques without adhering to gestalt principles. Technical eclectics try to answer the basic pragmatic question: what works for whom and under which particular circumstances. To extrapolate, the question would

also ask: what instruments or combination of instruments would help us to understand and predict certain behaviors?

The multimodal approach is individual and personal. Multimodal therapists attempt to discover individual exceptions to general rules and principles. By assessing seven dimensions of personality multimodal therapists search for appropriate interventions for each person. By utilizing a systematic and perceptive framework, a technically eclectic therapist can detect distinctive trends and helpful clusters in particular populations.

The multimodal approach offers a comprehensive assessment across seven aspects of personality. The acronym BASIC-ID stands for Behavior, Affect, Sensation, Imagery, Cognition, Interpersonal relations, and Drugs and/or biologically related issues. The multimodal orientation offers a systematic framework approach that comprehensively assesses the whole person. It provides specified procedures for assessing and remedying intraindividual and interpersonal problems. To know the salient characteristics of a person's BASIC-ID is to have a fairly accurate portrait of that person.

Developmentally, Lazarus believes that we are each the result of a unique combination of our genetic endowment, our physical environment, and our social learning history. Lazarus has taken all the diverse concepts pertaining to these three interactive forces and simplified them into the following five factors:

1. Classical and operant conditioning - everyone agrees that association plays a key role in all learning process.

2. Modeling and vicarious processes - to master complex tasks and social and occupational requirements.

3. Private events - comprised of thoughts, feelings, images, and sensations.

4. Nonconscious processes - it is evident that people display different degrees and levels of awareness.

5. Defense mechanisms - without becoming bogged down in psychoanalytic theory, this category is a direct acknowledgement of the empirical fact that people are capable of truncating their own awareness, of beguiling themselves, of mislabeling their affective responses and of losing touch with themselves.

The multimodal theory of Lazarus is a heuristic theory in that it yields knowledge and does so in a systematic way. This characteristic, heuristic, means that one discovery leads to another, one insight leads to another, because the theory puts together a number of previously unrelated facts.

Martin E. Ford (1986) lends support to Lazarus by stating that people are complexly organized systems with multiple components that function both semi-independently and interdependently. It is necessary to have a multivariate approach because a simplistic, unidimensional approach is likely to be less effective in explaining social-cognitive process. He states (p.202) that a multidimensional

therapeutic repertoire may be essential for treating people for widespread deficits in social skills.

Gerald Corey, in the introduction of his textbook "Theory and Practice of Counseling and Psychotherapy" (Brooks/Coles, 1977), recommends eclecticism as a framework for all counselors because valuable dimensions of human behavior can be overlooked if the counselor is restricted to a single theory.

Zilbergeld (1982) succinctly summarized the multimodal stance by writing that the aim of multimodal therapy was to come up with the best method for each client rather than force each client to fit the preferred therapy of the therapist.

Masters, Burish, Hollon, and Rimm (1987) cite two major advantages to MMT. The first is that many problems are multifaceted, that is, they are a complex interaction of many factors. Therefore, it is often therapeutically necessary to use a variety of diverse techniques to make the most effective interventions. MMT is designed to provide a comprehensive systematic paradigm for the counselor. Second, MMT recognizes that, because each client is unique, any given approach is not equally effective for everyone. MMT is an open system which not only permits techniques from varied approaches but also insists that the techniques be carefully chosen to be the most effective possible for that particular client.

Garfield and Bergin (1986) state that there has been a decisive shift towards eclecticism since 1978. The new view

holds that the long-term dominance of major theories has irreversibly given way to the eclectic frame of reference. A study by Fuchs and Rehm (1977) emphasizes the notion that "what works" must be defined in terms of the specific population with whom one engages therapeutically. For some battered women, we have not yet found out what works.

Definition of Terms

Battered Woman: for purposes of this study a battered woman was defined as one who had been battered to the extent that for her personal safety she had sought out shelter and had been approved for admission by trained staff.

Research Hypotheses

1. The first research hypothesis was that those subjects who had the Feeling preference in their MBTI would return to the battering relationship to a significantly greater degree than those who had the Thinking preference in their typology.

2. The second research hypothesis was that women who chose not to return to the battering relationship would score significantly higher on the California Psychological Inventory scales of Dominance and Independence, and lower on the Femininity/Masculinity scale than those who chose to return to the battering relationship.

3. The third research hypothesis was that those who chose not to return to the battering relationship would score

significantly higher on the Constructive Thinking Inventory scales of Emotional Coping and Behavioral Coping and significantly lower on the scale of Naive Optimism.

4. The fourth research hypothesis was that women who had previously left the batterer zero, one or two times would return to the abusive relationship to a significantly greater degree than would women who had previously left three or more times.

Methodology

Population of Sample

It is impossible to give an accurate estimate of the numbers of battered women. It is a fact, however, that in 1978 there were four shelters for battered women nationwide and in 1988 there were over one thousand (Gelles and Straus, 1988). The population utilized as the data base in this study consisted of fifty residents of the shelter provided by the Virginia Peninsula Counsel on Domestic Violence. This shelter serves an area of over 250 square miles. To be admitted to the shelter the woman must be presently in or escaping from a relationship which is dangerous to her well-being.

Data Gathering

Twenty-four to forty-eight hours after being admitted to the shelter, the women were asked to complete the California Psychological Inventory - Revised, the Constructive Thinking

Inventory, the Myers-Briggs Type Indicator, a demographic information sheet, and a consent form (see Appendix A).

Procedure

The dependent variable was: the decision of the shelter resident to (1) return to the relationship in which she had been battered; or 2) to not return to the relationship in which she had been battered.

Instruments

1. The Constructive Thinking Inventory (CTI) was designed to measure the types of attitudes that lead to success in everyday life. Specifically, the test measures constructive thinking, the ability to respond effectively to life. The test indicates how well a person manages his or her life emotionally and in challenging situations, as well as habitual responses to problems such as setbacks and failures. The test measures have a ring of common sense. The author of the test, Seymour Epstein, Ph.D., states that people who think constructively tend not to take things personally and not to worry about what others think of them. They take actions instead of complaining about a situation. The CTI predicts a wide range of life success, from happiness with families and relationships to physical and emotional health.

2. The California Psychological Inventory - Revised assesses "folk concepts" or constructs in evaluating typical

social interaction. The focus is interpersonal behavior or social interaction. The purpose of the CPI is to predict what people will say or how they will behave in defined situations.

3. The Myers-Briggs Type Indicator (MBTI), based on the typology of Carl Jung, measures personality dimensions which have characteristic strengths and weaknesses. The purpose of the MBTI is to enable us to understand how people are different and then to work with those differences in a constructive manner.

4. The demographic variable of 'times previously separated' was utilized as a fourth variable.

Ethical Considerations

If any of these inventories had caused the subjects emotional distress, free counseling was available under the supervision of Charles Matthews, Ph.D., L.P.C.

The subjects were free to withdraw from the research project at anytime.

This research project was approved by Kate McIntyre, Executive Director of the Virginia Peninsula Council on Domestic Violence, The College of William and Mary School of Education Committee on Human Subjects Research Committee, and The College of William and Mary Committee on Human Subjects Research Committee.

Limitations of the Study

1. Although the women were asked to not discuss the inventories used, there is no guarantee that this was not done. However, if the woman answered the inventories in a truthful manner, any prior discussion should not have affected the results.

2. The possibility that violence in a family may have mutual causation or that women may batter men is not negated. It was not, however, the focus of this study.

3. A logical question is whether or not the results of this study can be generalized to other shelters. In their study of women in Texas shelters, Stacey and Shupe (1983) stated that there was little reason to think that violence in Texas was different from violence anyplace else. In their national survey of violence, Straus, Gelles, and Steinmetz (1980) found no significant difference between the amount of conflict in northern and eastern families and southern and western families. Stacey and Shupe continue to say that the dynamics, the processes, and the mechanics of domestic violence are the same whether in Dallas or Detroit.

4. None of the data instruments have normative data on this population.

5. There is very probably a significant difference between those battered women who seek help and those battered women who do not seek help. To the extent that the results of this investigative study can be generalized, the results can

be generalized only to those women who have sought sanctuary.

6. A larger sample would have added power to the two scales which did have statistical significance.

7. It was not stipulated whether or not the same subject could be tested twice so therefore it was not done.

8. Women who could not complete the shelter intake form (see Appendix B) without assistance were not asked to complete these inventories.

Chapter II

Review of Literature

Development of Theoretical Concept

Historically, prior to 1950, psychoanalysis and psychotherapy were synonymous. Although many splinter groups had formed in the 1940s, the predominant theme remained essentially psychodynamic. During the 1950s there began a gradual emergence of approaches or systems that seriously challenged the technical and theoretical basis of the psychoanalytic school. "Carl Rogers developed his 'Client-Centered Therapy,' Fritz Perls cultivated 'Gestalt Therapy,' Albert Ellis presented what he then called 'Rational Psychotherapy,' and Joseph Wolpe wrote about 'Psychotherapy by Reciprocal Inhibition'" (Lazarus, cited in Zeig, 1987, p.165). During the 1960s and 1970s the proliferation of psychotherapies was such that Herink (cited in Zeig, 1985) published a handbook describing more than 250 different therapies.

In December, 1985, an Evolution Conference was held in Phoenix, Arizona. Described as the "Woodstock" of psychotherapy, this was the first comprehensive gathering of the leading theorists and practitioners in the field of psychotherapy. A few of the assembled included Aaron Beck, Murray

Bowen, Rollo May, Albert Ellis, Virginia Satir, Salvador Munichin, Joseph Wolpe, Carl Rogers, and Arnold Lazarus. When the six day conference ended, there was still no consensus on the definition of psychotherapy. Rollo May (cited in Zeig, 1987) indicated that psychotherapy is made up of over 250 schools. Zeig (1987) muses in the introduction of his book that it is no wonder that the field is in such disarray.

Zeig also discusses the two main unresolved issues in psycho-therapy - technique and theory. It is accepted common knowledge (Zeig, 1987, p.xx) that when a person has a problem, that problem must be divided into surmountable bits. Among the major theorists, however, there is major disagreement over the essence of these basic bits. Some divide the problem into behavior units and others divide the problem into cognition units. Another issue is whether to focus on the present, past, or future.

The discussions concerning theory were just as cloudy. There was considerable disagreement over how much theory should be emphasized and to what extent it should be utilized in practice. In discussing commonalities, Zeig noted that many practitioners theorized that dogma was a limitation in psychotherapy, that when one was wedded to an approach it became difficult to see the forest for the trees. In his discussion on how therapy is evolving, Zeig noted that across all psychotherapies there is an increasing emphasis on

tailoring the therapy to the patient. Yet Zeig concluded that there is no general reconciliation in sight for psychotherapy. This lack of convergency works against the patient who could benefit from interdisciplinary cross-fertilization.

While recent surveys (Garfield and Bergin, 1986, Smith, 1982) indicate that the majority of therapists are eclectic and multimodal in outlook, in the view of Lazarus only a few are multimodal therapists. Lazarus (1985) finds this distinction important. He states that MMT has a well-defined history, a systematic theoretical base, a coherent framework, and a wide range of specific techniques. Further, multimodal principles are expressed in terms that can be tested, and its procedures are consistent with current scientific findings. In the 1982 survey by Smith on trends in counseling and psychotherapy, Lazarus' trend-setting position, along with one other book, was considered most representative of the current zeitgeist in the field.

While MMT has not yet been utilized with battered women, it has been successfully used with other syndromes known to be resistant to unifocal treatments. One such example is a case of anorexia nervosa treated by O'Keefe and Castaldo (1985). Their review of literature suggests that although anorexia nervosa is characterized by complex interrelated psychological and physiological processes, it is often conceptualized and treated in unimodal or unifocal terms. O'Keefe and Castaldo state that even when more eclectic multi-dimensional

orientations are utilized, these orientations fail to provide a conceptual framework or systematic approach. It is perhaps for these reasons that treatment effects are limited and the relapse rates are high.

Even when eclectic treatment has been used, O'Keefe and Castaldo noted that practitioners generally employed a variety of therapeutic approaches in a somewhat shotgun fashion. None of the multi-dimensional approaches provided a conceptual framework for organizing the various characteristics of the disorder; none provided a systematic approach for assessment and treatment. By assessing their young client across the BASIC-ID, O'Keefe and Castaldo were able to determine their client's "firing order", the sequence of modalities that triggers the chain of events which are in need of modification. The firing order also indicates in which order the various treatments would be most effective. Mary, the young patient, had a firing order of C-A-B "i.e. it appeared that Mary first experienced some intrusive and dysfunctional thoughts related to food and self-control (C), which resulted in her becoming anxious and angry (A), resulting in inappropriate food refusal, acting out, etc. (B)" (O'Keefe and Castaldo, 1985, p.23).

Although the initial treatment of Mary's anorexia concentrated on increasing her body weight to a level which was medically safe, the early stages of therapy also focused on the Cognitive Modality since the constant and intrusive

thoughts related to food, dieting, weight gain, etc., were one of the few areas in her anorectic functioning that she was motivated to change. A "thought stopping" technique was used in which Mary was taught to interrupt food/diet thoughts immediately as they developed. The techniques of Rational Emotive Therapy (Ellis, cited in O'Keefe and Castaldo, 1985) were used to help Mary alter her dysfunctional thoughts and to learn rational thinking processes. In Affect Modality the two most prevalent and disruptive negative emotional reactions were anxiety and anger. Progressive relaxation exercises were taught in addition to the steps of an "anger control" program. The main focus of treatment within the Behavior Modality was to increase Mary's food intake. A detailed contingency management system was devised with the help of Mary's foster mother which resulted in a positive change in the eating behavior habits of the young patient. In addition to the reduction of negative symptoms associated with anorexia, Mary was taught a variety of positive coping skills across all seven modalities. Given the prolonged period of time in which Mary has remained symptom free plus the gains in her overall functioning, the prognosis for Mary's future can be considered very good.

O'Keefe and Castaldo summarize by stating that the benefits of the MMT approach were clearly demonstrated in this case. The complex symptomatology was put into a unified framework which enabled the therapists to determine

systematically the most effective therapeutic methods for each aspect of Mary's unique case of anorexia nervosa. The authors concluded that the comprehensive, systematic, holistic approach of MMT has much to offer practitioners in their treatment of anorexia nervosa in particular, and psychological disorders in general.

Sageeta Singg (1984), in her article "Toward an Understanding of Post-traumatic Stress Disorders: An Historical and Contemporary Perspective" traces the historical views that led to the development of current scientific perspectives of the diagnostic concept of post-traumatic stress disorder (PTSD). Singg covers the change in perspective from the 1860s theory of obscure injuries to the nervous system to the inclusion of PTSD into the Diagnostic and Statistical Manual of Mental Disorder (DSM-III).

Singg also covers the many types of catastrophes that cause PTSD, ranging from war, fire (the Boston Coconut Grove Night Club fire in which 493 people died) to other types of disasters such as the bursting of the Buffalo Creek Mining Company dam in which 125 people died and thousands were left homeless. Experiences with additional tragedies added to the growing knowledge on how the sudden trauma and psychological shock affected the disaster victims. Lifton and Olson (quoted in Singg, 1984) categorized the PTSD symptoms manifested by survivors into five categories.

The first, death imprint and death anxiety,

pertains to memories, visions, and recurrent nightmares of the death and massive destruction caused. The second category, death guilt, refers to survivor self-condemnation for having lived through the disaster while others perished. Psychic numbing, the third category, is characterized by a diminished feeling of self-worth among survivors involving apathy, depression, and a withdrawal from social intercourse. The fourth category, impaired human relationships, develops from the internal conflict between a need for love and succorance and the suspicion towards others who offer care or affection to disaster victims. The final category, the need to find significance, involves rationalizing the disaster to enable victims to resolve their inner conflicts (p.769).

In the clinical perspective, PTSD is characterized by anxiety but differs from other anxiety disorders in that the source of stress is an external event of an overwhelmingly painful nature. Other symptoms characteristic of PTSD are reexperiencing the traumatic event, emotional anesthesia, and a variety of autonomic, dysphoric, or cognitive symptoms. Impairment due to PTSD may be mild or it may affect all aspects of life. Despite an increasing knowledge base, little is known on how to alleviate or prevent PTSD.

Present knowledge indicates that the best intervention is

preventive in nature. Sank (cited in Singg, 1984) reported that therapists successfully reduced the effects of PTSD with the 154 men and women held hostage by the Hanfi Muslim at the B'Nai B'Rith National Headquarters in 1977. Since the complex and varied nature of PTSD makes it difficult to delineate a specific or unimodal program, therapy sessions based on the MMT of Lazarus were conducted twice weekly for four weeks; in addition, follow-up sessions were held three months and one year later. Slaikeu (cited in Singg, 1985) comments that the unique feature of MMT appears to be its immediacy and the use of a broad-spectrum of intervention techniques.

The onset of PTSD need not be experienced en masse. A single psychological traumatic event that is beyond the usual life experience of most people can be sufficient to trigger the sequence of responses that characterize the symptoms of PTSD. Slowinski (1985) treated a woman whose delayed reaction to an unprovoked stabbing by a stranger caused her to seek help more than two years after the attack. Sally, the client, had emotional lability, difficulty sleeping, recurrent nightmares, as well as newly developed avoidant behaviors that severely limited her freedom. Her interpersonal relationships were now characterized by anxiety, tension, and passive behavior followed by outbursts of temper. Sally reported that her personality and behavior were in direct opposition to how she had been before the attack.

After completing a Life History Questionnaire (standard

with MMT clients) and an Assertiveness Inventory, Sally's Multimodal Profile reflected the classic aspects of PTSD as well as other concerns about herself and her life. Since Sally's lability was effecting her performance at work, she requested that initial therapeutic intervention begin with her interpersonal difficulties on the job. This request was granted although in actuality the multimodal analysis allowed the therapist to intervene across several modalities simultaneously which worked in Sally's favor because rapid positive gains were achieved in both her personal and professional life. Slowinski notes that here again is an instance where unimodal, bimodal, or trimodal methods would have been most unlikely to provide the client with a sufficiently diverse range of coping mechanisms to sustain immediate gains. A basic assumption in MMT is that the more clients learn in therapy, the less likely they are to relapse afterward.

Another polysymptomatic problem for the therapist is the condition presented under the rubric of agoraphobia. Although over one hundred years have elapsed since the syndrome was first described (Westphal, cited in Rudolph, 1985), therapeutic efforts all too often don't address all the factors relevant to its onset and maintenance, for example, social and marital instability, high trait anxiety, deficient behavior and interpersonal skills, and negative cognitive expectancies (Matthews, Gelder, & Johnson, cited in Rudolph,

1985). In an effort to put some order into the "murky mosaic" of problems presented by the agoraphobic Rudolph (1985) successfully treated a 35-year-old woman by using the BASIC-ID of Lazarus to draw a blueprint outlining a hierarchy of prescriptive priorities. It is Rudolph's view that most treatment approaches compromise treatment efficacy by failing to attend to the seven modalities of the BASIC-ID and also by emphasizing intraindividual variables at the expense of interpersonal factors, both in assessment and treatment.

Mrs. B was referred to MMT after unsuccessfully undergoing traditional and unimodal approaches utilized by several other professionals. She presented with a core fear of uncontrollable panic attacks, attacks of hyperventilation, sensations of pins and needles, feelings of guilt, confusion and despondency, and fears that her eighteen year marriage was about to end.

A first-order Multimodal Profile was constructed using the information gathered from the initial assessment interviews and the Life History Questionnaire. Because the item "loss of control" is considered to be a focal point for treatment in the agoraphobic symptom matrix, a second-order BASIC-ID was constructed on this one item to more specifically target the precipitating and maintaining factors in Mrs. B's unique case of agoraphobia.

Careful study of the second-order BASIC-ID revealed that marital difficulties played a prominent role in the

maintenance of Mrs. B's agoraphobic problems. She also had a deficit of "self-control strategies" which are vital to moderating negative sensory and physical experiences associated with autonomic arousal; she also had a pervasive attitude of alienation and hopelessness reinforced by interpersonal and situational avoidance.

Since a primary concern of the client was her marriage, she and her husband were given the Marital Satisfaction Questionnaire (Lazarus, 1981). The results indicated that while they certainly had dysfunctional communicative and behavioral patterns, they were also highly motivated to stay together and work out their differences. A therapeutic decision was made to involve Mr. B in the treatment of his wife. An initial therapeutic concern was that Mrs. B had a damaged attributional system i.e., she felt that her previous behaviors had resulted in her receiving her "just rewards" by being sick. Rudolph notes that failure to address these views would have left Mrs. B open to tempering her constructive efforts and sabotaging her progress. (Author's note: it is important when working with battered women to address their cognitive views that they must have done something to deserve the battering). A focal point in the initial therapy was building a psycho-educational framework that emphasized an understanding of how anxiety attacks evolve and are perpetuated and what one can do about them. Thus, instead of focusing on attacking agoraphobic symptoms (e.g. behavior

avoidance patterns), initial emphasis was placed on "(1) teaching Mrs. B rational problem-analysis, (2) developing the family as a supportive resource, and (3) increasing empathy and support within the marriage" (Lazarus, 1981, p.42).

After 42 sessions Rudolph states that Mrs. B was markedly improved, not cured. Her movement was geographically restricted to familiar and local places, but she functioned with an enhanced sense of self-esteem because of an increased locus of control and an unshakable sense of family support. She also had at her disposal an armamentarium of proven and applied coping skills with which she increasingly challenged avoidance and defensive behavioral patterns. Rudolph views the use of MMT as the key to providing a precise understanding of interrelated problem areas. The construction of a personal and flexible therapeutic program, clearly understood and applied by the client, was considered by Rudolph to be the most important factor to treatment success.

Cognitive dissonance, first proposed as a psychological construct by Leon Festinger in 1957 (cited in Richard, 1985), and later elaborated on and reformulated by Aronson in 1976 (cited in Richard, 1985) is defined as "a state of tension that occurs whenever an individual simultaneously holds two cognitions (ideas, attitudes, beliefs, opinions) that are psychologically inconsistent" (Richard, 1985, p. 109). Since this is a state often experienced by battered women (I must stay because I made a commitment, I must go because I am being

battered) this study is used to illustrate the point that unless the client/patient is assessed in a holistic manner, valuable information is overlooked.

Sally, a 33-year-old married woman with two children, was referred by her physician to Richard for biofeedback training because the physician was worried that Sally's persistent migraine headaches would cause her to become dependent on medication.

Because biofeedback training was an appropriate treatment, this treatment was initiated. In addition, Richard assessed Sally across Lazarus' BASIC-ID. Beyond the presenting complaint, it was discovered that there was considerable risk in Sally becoming pregnant again. Her uncle, a physician, was urging her to have a tubal ligation. This suggestion was in conflict with her religious beliefs; her husband also had strong feelings about the issue of birth control. Had Sally been treated on the narrow spectrum of "biofeedback for migraines" this new valuable information would not have been discovered. The use of the Modality Profile called attention to areas in need of therapeutic intervention that went beyond the presenting complaint.

Since the state of tension is unpleasant, people are motivated to reduce this tension. People are in a state of tension if there is disparity between what a person thinks (and feels) and how she/he behaves. Sally's conflict was that she wanted to use birth control so that her marital

relationship with her husband would not suffer but yet she did not want to compromise her religious beliefs.

Aronson (cited in Richard, 1985) states that dissonance can often be resolved by introducing a third cognition that bridges the gap between the original two cognitions. Using Lazarus's concept of bridging, Richard initiated some cognitive disputations that were already familiar to her because they originated from her cultural-religious tradition. It was suggested that she discuss her value priorities (adherence to religious prohibition against artificial birth control versus marital harmony and family integrity) with her husband.

The second cognition was the principle of "Double Effect," which states that if one is confronted with two alternatives (birth control vs. no birth control) the less good or less desirable (birth control) can be elected if it leads to the achievement of a greater good (family solidarity and marital survival) that could not be reached if the more desirable alternative were chosen. This rather elaborate philosophical religious principle was readily understood by the patient and her husband because it came out of the religious training that both had received in their earlier years. This cognitive disputation, adding a new cognition, reconciled the two conflicting cognitions and legitimized the change in behavior which was practicing birth control (Richard,

1985, p.112).

The one year follow-up revealed that Sally underwent a tubal ligation and that she and her husband were comfortable with her decision.

It has been the experience of this writer that workers in the field of domestic violence focus only on the safety issues involved and do not look beyond to the cognitions and affects which may be holding the woman to an abusive relationship.

Critique

None of the articles concern battered women, none have long term follow-up to see if treatment gains were maintained, and all were single case studies. However, all reflect the importance of assessing a client across more than one dimension. All use the factor analysis of Guilford (cited in Corisini, 1982) who stated that:

humans tend to perceive, think, emote, and behave simultaneously. They, therefore, at one and the same time, are cognitive, conative, and motoric. To understand their self-defeating conduct, we had better understand how people perceive, think, emote, and act. To help them change their malfunctioning, it is desirable to use a variety of perceptual-cognitive-emotive-evocative- and behavioristic methods in full armamentarium (p.197).

Historical Review of Literature on the Abuse of Women

Historically, the recorded abuse of women started in 735 B.C. with the tradition of the laws of chastisement. Beginning with the reign of Romulus in Rome, a husband had the right to physically discipline his wife for various offenses, including unspecified offenses (Okun, 1986). Laws of chastisement are best represented by the "rule of thumb" of English common law which stated that a man could beat his wife with a rod or switch, so long as its circumference was no greater than the girth of the base of the man's right thumb. Wives were not granted a reciprocal right to chastise their husbands (Steimetz, 1980).

Other laws governing domestic relations formulated by Romulus revealed more double standards. A wife did not exist as a legal individual; she was viewed as a necessary and inseparable possession of her husband. Wives faced the death penalty for offenses such as drinking wine and adultery while husbands were granted the freedom to engage in these activities with impunity. Women also had no property rights, even as widows (Dobash & Dobash, 1979, cited in Okun, 1986).

The rise of Christianity reaffirmed the tradition of a husband's patriarchal authority. Various Biblical verses were used to keep women in their place. "I will greatly multiply thy sorrow and thy conception; in sorrow thou shalt bring forth children and thy desire shall be to thy husband and he shall rule over thee" (Genesis 3:16). The New Testament

supported women's expected subservience in their relationship to men when Paul said:

Let a woman learn silence with all submissiveness. Permit no woman to teach or have authority over men; she is to keep silent. For Adam was formed first and then Eve, but woman was deceived first and became the aggressor (I Timothy 2:11-14).

Although women have been battered throughout history, it has been only in the last twenty years that violence of this nature has been considered a serious social problem. In answer to the question of why battered women stay in the abusive relationship, the traditional psychoanalytic view held:

The specific satisfactions sought and the female sex life and motherhood are of a masochistic nature. The content of the early sexual wishes and fantasies concerning the father is the desire to be mutilated, that is, castrated by him. Menstruation has the hidden connotation of a masochistic experience. What the woman secretly desires in intercourse is rape and violence, or in the mental sphere, humiliation. The process of childbirth also gives her an unconscious masochistic satisfaction, as is also the case with the maternal relation to the child. Furthermore, as far as men indulge in masochistic fantasies or performances, these represent an expression of their desire to play the female role (Horney,

1935/1967, p.215).

Although Horney questioned Freud's theorizing on the masochistic character of women by asking for the data, other female psychoanalysts supported the Freudian view of female masochism. The assumption of Deutsch (cited in Horney, 1935/1967) was that genetic factors of a biological nature accounted for the masochistic nature of females. Deutsch continued to affirm that masochism is the most elemental power in a female's mental life.

As recently as 1964, Snell, Rosenwald, and Robey (cited in Zielke, 1984) concluded that spouse abuse was an isolated problem in disturbed couples in which violence was seen as fulfilling the masochistic needs of the wife and even as necessary for the wife's equilibrium.

While the myth that women loved to be beaten continued to prevail (Walker, 1979), laws and legal precedent continued to sanction the right of a husband to use violence as a means of controlling his wife (Gelles & Straus, 1980). Although a 1924 Mississippi law allowing for "corporal punishment" of wives was eventually overturned, a Massachusetts law detailing the previous rights of husbands over their wives was starkly more explicit. The verdict read:

And the privilege, ancient though it be, to beat her with a stick, to pull her hair, to choke her, spit in her face or kick her about the floor, or to inflict upon her other like indignities, is not now recognized by our law

(Dobash & Dobash, 1979, p.63).

De jure reform did not constitute defacto reform (Gelles & Straus, 1980, Okun, 1986). Not until 1976 did the New York courts accept one assault as being sufficient for grounds for divorce (Okun, 1986). Okun continues by relating that also in 1976:

public service attorneys representing battered women in New York were obliged to file a class action lawsuit (Bruno et al. vs. Codd, et al.) in order to obtain equitable police and family court policies in domestic assault situations, so that batterers would be arrested and battered women would be informed of their rights and permitted access to judges (Okun, 1986, p.6).

In the social area, millions laughed when Jackie Gleason, in "The Honeymooners" TV series yelled, "One of these days, POW, right in the kisser!" while shaking his fist at his wife. Millions more laughed when Ricky, who loved his Lucy, turned her over his knee and spanked her.

During the late 1960s, the U.S. Commission on the Causes and Prevention of Violence conducted a national survey on violence. Among the findings were that one in four men and one in six women said that they could think of circumstances in which it would be permissible for a husband to hit his wife (Gelles & Straus, 1988). Thus, society continued to "draw the curtain" on domestic violence so that the parties could "forgive and forget" (Okun, 1986).

Fortunately for battered women (and all other battered family members) in 1971 an English woman named Erin Pizzey established a neighborhood center where women could come together and talk. The unexpected result was that women finally began to share the shame of being abused (Gelles & Straus, 1988, Okun, 1986, Straus, Gelles & Steinmetz, 1980). Pizzey (1974) authored a book entitled Scream Quietly or the Neighbors Will Hear which brought spousal abuse to British national attention. Pizzey ultimately founded the first safe house or shelter for battered wives.

For their American sisters, the abuse of women was not initially a priority concern when feminism was reborn in the 1960s. However, with the advent of conscious-raising groups, the conspiracy of silence, based in part upon ignorance of the prevalence of the problem, was broken (Okun, 1986). The political drive led by Pizzey in England coincided with the National Organization for Women's (NOW) deciding to make battered women one of their priority issues (Okun, 1986, Straus, Gelles, & Steinmetz, 1980). The first American shelter for battered women, the Women's Advocates and Haven House, opened in 1976. There was a national political move by women's groups to establish better social services for battered women and to effect changes in legal statutes which denied women adequate protection from being battered by their husbands.

According to Gelles and Straus, (1988) the first

published article on wife abuse was a 1960 paper by Leroy Schultz entitled The Wife Assaulter. The early pioneering studies on abuse were based exclusively on an analysis of a limited number of clinical cases. The word "violence" had never appeared in the title of an article in the Journal of Marriage and the Family until 1971 when an entire issue was devoted to the subject. Battered Women, published in 1976 by Del Martin, was the first American book which was devoted exclusively to the subject of the abuse of women.

The research became focused on "family violence." According to Okun (1986), the empirical literature had five main goals:

- 1) documenting incidence and prevalence of woman-battering and/or conjugal violence; 2) discovering and relating patterns in conjugal abuse and factors contributing to its occurrence and/or cessation; 3) the influence of social factors such as cultural norms and helping agencies; 4) presenting psychological analyses or profiles of the abuser and victim; 5) answering the question that has traditionally been in the forefront of the public's interest - why does the battered woman remain in her violent relationship. This question is usually rendered simply as "Why does she stay?" (p.14).

To consider the first four points briefly:

1. Gelles and Straus (1988) state that the major limitation of official report data is that the information is

limited only to cases that come to official public attention which represent only the tip of the iceberg. The limitations on social surveys include "limits on the amount of data that can be collected, biases in terms of which people are included and excluded by using survey sampling techniques, and biases arising from which individuals are willing to report on a questionnaire and which are willing to tell an interviewer" (p.75).

2. The early research on patterns and factors contributing to abuse have ranged widely. It includes histories of family abuse, abuse of alcohol and other drugs, whether the man is unemployed and therefore feels powerless, and it concentrates mainly on what the wife did to provoke the attack.

3. The research on cultural norms includes but is not limited to two important areas. The first is that abusive men and abused women are locked into rigid sex roles. Society has assigned gender roles that place men in a dominant position, women in a subordinate one (Miller, 1976). There are three central assumptions about male and female roles in these gender-based assignments:

(1) Men believe they should always have privilege and the right to control women's lives; (2) women believe they are responsible for whatever goes wrong in a human relationship, and (3) women believe men are essential for their well-being - essential rather than merely desirable

or enjoyable (Goodrich, Rampage, Ellman, & Halstead, 1988, p.7).

Feminists have exposed the relationship between sexual, physical, and emotional violence and the privacy of the home as a place for exercise of male privilege. In 1974 De Beauvoir wrote that as long as women and children are subordinate in a culture and are in a family where men are dominant, women and children are in danger. Thoughtful feminists recognize that rigid roles have oppressed males also, but in a different manner.

The second area in research on the relationship between cultural norms and domestic violence centers on homophobia in men (Martin 1981). Martin states that homophobic men become obsessed with "masculinity" and repress any traits that may be labeled "feminine." These men must constantly prove their manhood and lash out whenever they feel challenged. In spite of the fact that men are socialized to be powerful, the reality is that few have any power to exercise. Consequently, many men are like pent-up volcanoes ready to erupt. Wives, socialized to be weak and passive, then become ready targets for otherwise unexpressed rage.

4. The psychological profiles of battered women have ranged from family histories to MMPI scores (Charboneau, 1986). Abusers have been described as men who, for whatever reason, do not control their aggression and regard women as legitimate targets (Hilberman, 1980). They have further been

described as men who are overly dependent, and who, because they have difficulty in differentiating their emotions, have their feelings of fear, anxiety, frustration, hurt, etc., lumped together and expressed as anger (Martin, 1981).

Review of Recent Literature on Characteristics of this Population

There is no simple answer to the fifth question - why does she stay. Walker (1979) states that when an estimated one million women a year are being beaten, we are not dealing with individual psychology but with a serious social disorder. A complex combination of sociological and psychological variables blend together to explain the battered woman syndrome. One of the well-accepted psychological variables is that of learned helplessness. Based on the work of Martin Seligman, this theory evolved when Seligman noticed that dogs subjected to noncontingent negative reinforcement (random shocking) learned that regardless of what they did, they could not control the shock. At first, the dogs attempted to escape through various voluntary actions. When nothing worked, the dogs gave up and became submissive, passive, and compliant. When the researchers tried to show the dogs that they, the dogs, could cross the cage and escape, still the dogs made no effort to leave. Even after the doors were left open the dogs remained passive, refused to leave, and did nothing to avoid the shock. The dogs had learned helplessness.

Walker (1979), in her landmark study of 120 battered

women, observed this same behavior in her subjects. She makes the point that when this phenomenon occurs in humans, learning is hampered and the repertoire of responses from which to choose becomes narrow or nonexistent to the person involved. Walker theorizes that some battered women have become blind to their options and believe that they cannot influence the direction of their lives. A chronic feeling of powerlessness takes over which does not dissipate. Repeated batterings, like repeated shocks, diminish the victim's motivation to respond, thus inducing passivity. Her cognitive ability to perceive that she has options has diminished to the point where she feels that no matter what she does, it will not alter her life course.

In a later study involving 400 women, Walker (1984) found further support for application of Seligman's theory to battered women. Walker concluded that there may be susceptibility factors that originate in childhood and in the battering relationship itself that cause the battered woman to concentrate on developing survival skills rather than escaping the abusive relationship altogether.

Walker's theory of learned helplessness stood relatively unchallenged until a paper was presented in 1988 by Barbara Wauchope. In her study of data obtained from 3,665 women Wauchope tested the learned helplessness theory, stress theory, and a modified stress theory to determine the best model for predicting the probability that a woman would seek

help when she experienced severe violence from her male partner. It was hypothesized that as the level of stress induced by the violence increased the probability increased that the woman would seek help. Help was sought one or more times by 68% of the subjects who had experienced severe violence; the predicted probability of seeking help for high levels of violence was .77. While other factors such as age, education, occupation, having parents who hit each other, fear of being hit, and depression influenced the probability of seeking help, the primary factor in the decision to seek help was the amount of severe violence experienced. Thus, the data in this study did not support the theory of learned helplessness.

Hader (1983) did a study which investigated the personality characteristics that related to the life styles of battered women. Based on the work of Alfred Adler, an instrument was utilized which classified life styles into five distinct typology categories. Briefly explained, they are as follows:

CONTROLLER indicates a typology who is demanding, somewhat rebellious, and who is in physical and psychological control of self. PERFECTIONIST specifies having high standards of right and wrong, demanding perfection, needing to be right, and worrying about making decisions. NEED TO PLEASE indicates the need to be good, to be obedient, to show concern for others, and

to seek approval. VICTIM is pessimistic and complaining, feels most punished, has low standards of accomplishment, has few friends, and endorses negative attributes, self-pity, and resignation. The MARTYR suffers for a cause or a principle and strives to feel noble and superior through this suffering (Hader, 1983, p.3).

The results of this study indicated that the typologies of battered women differed significantly from those women who had never been battered. The battered women scored highest in the NEED TO PLEASE category while those women who had never been battered scored highest in the CONTROLLER category. Hader concluded that women who scored high in the NEED TO PLEASE category lent themselves as targets in situations where abuse was likely to occur, and that women who scored high in the CONTROLLER were not as likely to be victims of domestic violence.

Bratslavsky (1984) investigated the differences between battered and nonbattered women using the Purpose-in-Life Test and the Traditional Family Ideology Scale. Based upon the concept of Viktor Frankl's existential vacuum, this study examined the relationship of the existential meaning and purpose in life with early exposure to an autocratic or traditional family ideology. Bratslavsky theorized that these two constructs could combine in a manner which would explain how a woman would become the "appropriate" victim of physical abuse. She assumed that an autocratic ideological system may

be operating in battered women which would prevent them from perceiving their own meaning and purpose in life. Bratslavsky described the prototype authoritarian family as follows:

In this type of unit roles are clearly and rigidly defined. The father is at the top of a hierarchical structure, expecting and receiving honor/fear from his wife and his children. His obligations to his family are to be a good provider, to be strict and justly punitive, to guide his children's education, and to set an example of manliness, industry, and consistency. Warmth toward family members is considered as a sign of weakness. The wife is passive and dependent upon her husband, achieving security and status through identification with him, and through womanly - domestic - attainments. She is not expected to defy the husband, not even on behalf of the children. The child's duty is to learn orderliness, industry, self-control, submission to authority, and the role appropriate to his/her sex (p.74).

Bratslavsky theorized that a woman's awareness of freedom and choice to determine her own meaning and purpose in life and to develop her own identity would depend on how she had been raised. An autocratic upbringing would instill a sense of being subordinate and meaningless in relation to others, and this would prevent a woman from acting meaningfully, purposefully, and responsibly in her own behalf. The results of this study supported the hypothesis that battered women

would differ significantly from nonbattered women in the degree to which they endorsed an autocratic family ideology and also the degree for which they expressed a sense of purposeless and meaningless in life.

Battered women are more likely to be conventional in their ideas and actions, ... more likely to be submissive to authority, and in her own family obedient to her husband. She is more likely to think and act in terms of exaggerated femininity whereby her traits and functions must correspond to appropriate sex role without deviating from them in interests, values, activities, and so forth. She is more likely to accept rules strictly and avoid rule violations.... She is more like to inhibit and deny a large part of her feelings and desires....

It follows from this ideology that the battered woman sustains the belief that her role and fate in the family requires subordination while the male role and fate in the family corresponds to superordination. Because of the battered woman's attitude to her role and destiny in the family, she may feel that physical abuse is a natural component of the relationship which she must accept.... Because the battered woman finds herself in a situation of physical abuse and in a state of existential vacuum she may no longer know what she must do. She is told by traditions and values what she should do. But her sense of meaninglessness and purposelessness

coupled with the physical abuse may result in her knowing neither what she must do nor should do" (pp.135-137).

In a dissertation study, Zielke (1984) hypothesized that battered women would have a sense of external control to a greater degree than a comparison group of nonbattered women, that battered women would be self-described as having more characteristics traditionally associated as being feminine in nature, and that there would be a relationship between the self-perceived feminine role orientation and the locus of control. Zielke used 42 shelter residents as her subjects.

The data supported the hypotheses that these subject battered women were more likely to believe that rewards received in life were determined by external forces such as luck, fate, or powerful others than was the comparison group. The subjects also described themselves as having more feminine characteristics and fewer masculine characteristics than did the comparison group. The data also supported the hypothesis that there was a significant and positive relationship between locus of control and self-perceived feminine role orientation.

Zielke concluded that her study provided empirical support for those who theorize that battered women are victims of over-socialization into the stereotyped or traditional feminine role. Since society has conditioned women to be passive, dependent, and submissive, battered women have little experience in believing they have much control over their

lives or in being responsible for themselves.

Rosewater (1982) theorizes that a major contribution of feminist therapy is the ability to view a woman and her problems in the context of the society in which she lives. A woman who comes to therapy with the symptoms of apprehension, suspiciousness, and fearfulness in addition to days of missed work and withdrawal from family may be diagnosed as borderline or schizophrenic. The missing piece may be that the woman is also battered. The misdiagnosis can cause the therapist to treat the client for intrapsychic disorders when in fact the woman's behavior is a very reasonable response to the circumstances of her life.

Rosewater administered the Minnesota Multiphasic Personality Inventory (MMPI) to 118 women, of which all but twelve were currently in abusive situations. The purpose of the research was to determine if a "battered woman's profile" existed on the MMPI. Rosewater states that the DSM-III lists several behavioral descriptors as indicative of a schizophrenic disorder, but these descriptors can also describe a battered woman. For example, fear is a very real element for battered women and a valid reason why they stay in abusive relationships. Since battering usually occurs in the privacy of the home, the only witnesses are the couple themselves. The abuser is usually a denier and blamer - he denies the violence took place or he blames the victim. Thus, the only one who really knows the extent to which these men

can be violent is the victim. Paranoia, a delusion of persecution, means that the fear has no basis in fact. Many battered women appear paranoid and delusional because they are reporting events of which no one else has or admits to any knowledge. Rosewater states that though the source of the fear is hidden it does not mean that it is not very real. There is a deterioration from a previous level of functioning because it is difficult to keep up appearances when one has been bruised and bloodied. In addition, the excessive jealousy of the batterer causes him to place rigid restrictions on his wife's social activities which keeps her in social isolation. The emotional stress of being in a state of crisis is exhausting and causes her to function at a lower level than previously. Although the presenting symptoms are similar, the treatment of battered women and schizophrenics differs greatly. The major basic difference is the validation by the clinician that the battered woman's fears are real while the fears of the schizophrenic client are imagined. The battered woman can also present as a borderline. The DSM-III criteria for borderline disorder includes, among others, unpredictability or impulsivity in areas that are potentially self-damaging such as inappropriate and intense anger, affective instability, chronic feelings of emptiness or boredom, and intolerance of being alone. Again, Rosewater makes the point that these behaviors need to be seen as understandable behaviors, given the violent realities in the

life of a battered woman. The confusion and fearfulness should not be treated as dysfunctional symptoms but as normal consequences of living with violence.

Rosewater does not deny that some battered women may be battered and borderline or schizophrenic, but she contends that women who present with similar symptoms may in fact be "only" battered. A probe for a history of domestic violence is necessary to clarify the possibility of confusion between the symptoms of emotional disturbance and those of a battered woman.

Critique

Okun (1986) states, and this researcher agrees, that it is premature to describe most theoretical hypotheses about domestic violence as either proven or refuted. Walker's theory of learned helplessness has been helpful in explaining the tendency of some women to remain in abusive relationships. But the theory does not explain the differences between those women who remain in the relationship and those who choose to leave. By the fact of some women coming to the shelter for help, they have demonstrated that they are not entirely passive. This study attempted to distinguish between those women who come to the shelter as a temporary haven and those women who have decided to become an active agent in their own lives. Walker also used a 200-page questionnaire developed specifically for her study. An instrument of this type is not

feasible for most shelters which are staffed primarily by volunteers and have only small credentialed staffs. This study utilized instruments which can be scored quickly on the personal computers which are now standard office equipment, or, in the case of the Myers-Briggs Type Indicator, can be hand scored by a professional.

The study by Rosewater is important in that it validates the experience of battered women by distinguishing between what presents as pathology but is in actuality the result of battering. However, the use of the MMPI is beyond the ability of most shelters.

The studies of Hader, Bratslavsky, and Zielke compared battered women with nonbattered women. Since the life experiences of battered women have, at least on the surface, been vastly different from nonbattered women, battered women should be compared to each other. It is granted that help-seeking battered women are in all probability different from those who do not seek help; this study used subjects who had sought help at a shelter. Further, this study attempted to distinguish between those who chose to leave the abusive relationship and those who chose to return to the abusive relationship.

Descriptive Variable: California Psychological Inventory Revised

Jean Baker Miller (1986) theorizes that the development of the sense of self in a woman is vastly different from that

of a man. Traditional theory from Erikson (1950) to Levinson (1978) tends to see development as a process of separating oneself out from the matrix of others. After going through a series of painful crises the young adult emerges as a self-actualizing, unneedy, solidly bounded, autonomous, minimally emotional self. When this person arrives at Erikson's stage of intimacy, she/he is supposed to become intimate, having spent all prior development geared to individuality.

Most theorists starting with Freud have tried to fit women into this model, but it was the proverbial round peg in a square hole. Miller states that the female has been culturally conditioned to define herself **through** others, not **apart** from others. Both male and female babies begin to develop a sense of self within the context of a relationship, not just the image of the caretaker, but in connection with what that caretaker is actually doing in an interactive relationship with the baby. If children develop because of this positive interactive relationship, they develop not a separate sense of self, but rather a more complex sense of self that becomes defined and refined as they enter into ever more complex relationships with others. The growing girl's sense of self-esteem and self-worth becomes based in feeling that she is part of relationships and that she is taking care of those relationships. To feel related to others is not seen as threatening but as enhancing.

Throughout childhood and the adolescent years, what may

be termed as 'normal' development becomes very influenced by culture. Boys learn to move away from their mothers and identify with the dominant male figure. Girls learn that they should focus all of their energies on the growth, well-being, and development of men. At the same time, the relationship with mothers and other women continues. Mothers and other women have traditionally upheld the superiority and importance of the male. This writer remembers well that girls were never to beat boys at games, that we were never to appear smarter, and that we deferred to males in all matters.

While girls are learning to become 'proper' women and carry on cultural tradition and values, boys are learning about 'industry' which has been described as learning the rules of the game and how to play them (Gilligan, 1982). The practical implications of this difference in the development of the self are many. One is that women talk about relationships more than men. This is often misinterpreted as dependency. But if one listens carefully to what women are saying, it is not about wanting to be dependent or independent, it is about wanting to be in a relationship with another. This study used the California Psychological Inventory - Revised scales of Dominance (Do), Independence (In), and Femininity/Masculinity (F/M) to ascertain if there was a significant difference between those women who were ready to terminate the abusive relationship and those who were not ready to terminate the abusive relationship. The Do scale

distinguishes between those who are confident, assertive, task-oriented and dominant from those who are unassuming, passive, nonassertive, and dependent. High scorers on the In scale are self-sufficient, resourceful, and detached; low scorers lack self-confidence, are hesitant to take independent action, preferring instead to emphasize cooperation and affiliation with others. High scorers on the F/M scale are sympathetic, helpful, sensitive to criticism, tend to interpret events from a personal point of view, and often feel vulnerable. Low scorers on the F/M scale are decisive, action-oriented, more tough-minded than sensitive, emotionally independent, and are able to live with the consequences of their behavior.

Goodrich, Rampage, Ellman, and Halstead (1988) are the founders and faculty of The Women's Institute for Life Studies in Houston, Texas. In their book, Feminist Family Therapy, the authors state that to experience one's self as female in this society is to experience personal responsibility for relationships. The cultural expectation is that wife/mother is the caretaker of the family, the nurturer, harmonizer, peacekeeper of the world. A women's primary task is to be relational, to maintain relationships, to endure and persevere. The point is made that this notion of a woman enduring a difficult relationship was popularized in song by Tammy Wynette singing "Stand By Your Man."

In a cognitive-behavioral approach to treatment with

batterers, Sonkin, Martin, and Walker (cited in Adams, 1988) identified several aspects of battering which were self-reinforcing. One such reinforcer was that the violence created an immobility in the women which was viewed by the batterer as complicity. The violence became a way of controlling and incapacitating his partner to the extent that her independence no longer was a threat to him. It was hoped that the scales of the CPI would identify those women who had regained enough independence to terminate the abusive relationship.

Wife beating is now recognized to be a controlling behavior that serves to create and maintain an imbalance of power between the battering man and the battered woman (Martin, 1981; Schechter, 1982, cited in Adams, 1988). "Because power and control are seen as the fundamental issues, therapeutic interventions directly challenge the abusive man's attempts to control his partner through the use of physical force, verbal and nonverbal intimidation, and psychological abuse" (Adams, 1988, p.191). Because the woman has been devalued, humiliated, and discounted, there are feelings of frustration, failure, and powerlessness. Downing and Roush (1985) developed a model of feminist identity which may help explain why some women appear to be stuck in a destructive relationship.

Based on their years of clinical and personal experience, the authors believe that any model of developmental theory

involving women must acknowledge the prejudice and discrimination that are a significant part of their life experience. Based on the developmental model of Black identity (Cross, cited in Downing & Roush, 1985) the five stages of development are:

1. Passive Acceptance: This woman either denies or is unaware of the discrimination against her. She is accepting of the traditional sex-role stereotypes and believes that men are superior to women.

2. Revelation: This woman has become aware of the discrimination against women in general and herself in particular. Anger and guilt are the two primary emotions of this stage. All men are seen as negative and all women as positive.

3. Embeddedness-Emanation: In the beginning of this stage women join the sisterhood and have as little as possible to do with men. The second part of this stage is characterized by an awareness that all men aren't bad and all women aren't wonderful.

4. Synthesis: Women in this stage learn to value the positive aspects of being female. They are able to transcend traditional sex role stereotyping, make choices from well-defined personal values, and evaluate both men and women on an individual basis. They also learn to make appropriate responses to experiences of oppression and discrimination.

5. Active Commitment: This woman, with a positive new

identity, makes a deep and pervasive commitment to social change. The goal is for a future free of sex-role stereotyping and oppression of either sex.

The point is made that these stages are multidetermined and multidimensional. Movement through stages one to five is usually sequential although an unexpected oppressive experience may cause a backward movement. The stages are useful for helping to understand why some women do seem stuck (why does she stay?) and why other budding feminists are so angry. In theory, the CPI-R scales would have identified those women in Stage 1 who had come to the shelter to escape the violence but were not yet ready to terminate the relationship. Stage 4 women, those able to transcend traditional sex role stereotyping and thus able to make well-defined personal choices free of oppression, should also have been identified.

Warren (1987) did a dissertation utilizing the Bem Sex Role Inventory and the Fundamental Interpersonal Relations Inventory on battered and nonbattered women. The four primary variables were sex role type, sex roles, control, and inclusion. The women were matched on age, education, and employment status. No significant differences were found between the two groups on femininity, masculinity, expressed control, expressed inclusion, and wanted inclusion.

There were significant differences on the variables of sex role type and wanted control. The battered subjects were

more frequently sex typed as feminine while the nonbattered subjects were more frequently masculine and/or androgynous. The battered women were also more tolerant of external control than the comparison group.

Johnson-Nalls (1986) did a dissertation utilizing the California Psychological Inventory to examine the role of personality characteristics in the decision-making process of 53 sheltered battered women on whether or not to return to the abusive relationship. Johnson-Nalls used scales 1 through 5, 7 through 11, and 13 through 18. Scales 6 and 12 were compared separately. The results indicated that there was no significant relationship between the personality characteristics of these subjects and their decision to return or not return.

Critique

Goodrich, Rampage, Ellman, & Halstead (1988) speak of feminism as the philosophy which recognizes that men and women have different experiences of self, of other, of life, and that men's experience has been widely articulated while women's has been ignored or misrepresented. There was a time when the vast majority of women were raised to find their identity through others. It is a perception of this researcher that more women today are being raised to be more individuated. Because this developmental theory of women may describe the experience of fewer women today does not make it

any less valid for those whose experience it does describe.

The study of Goodrich, Rampage, Ellman, and Halstead (1988) is not an empirical study. Their theory is based on their combined years of clinical and personal experience. They have worked with battered women but made no attempt to distinguish between those who left the battering partner and those who chose to remain in the relationship.

The study of Sonkin, Martin, and Walker (cited in Adams, 1988) was focused on men. Yet it gave valuable insight into what the batterers hoped to accomplish by the abuse - the immobility and incapacitation of their partners to respond effectively to life, to be too scared to leave.

The study of Downing and Roush (1979), from which they derived their model of positive feminist identity, was not an empirical study. Again the theory comes from observation and clinical work. No mention was made that battered women were the subjects at any point in the development of the theory. The theory provides a valuable schema in developmental identity, but the limited shelter staff needs a quicker method of assessment.

The study of Johnson-Nalls used one assessment tool. Multimodal Therapy stresses the importance of assessing a subject across several dimensions. Bergin and Garfield (1986) agree with MMT by stating that divergent methods of criterion measurements must be used to match the diversity in human beings.

Warren's study compared battered to nonbattered women. Also, she made no distinction between those women who chose to terminate the relationship from those who chose to return. In addition, the items on the BEM Sex Role Inventory are:

selected in terms of judges' rating of their relative desirability for males or females and the degree to which they characterize each sex in our society. Hence what is assessed is the respondent's conformity to a currently accepted ideal or prevalent stereotype of male and female behavior (Anatasi, 1988, p.592).

Bem is quoted in Anatasi as stating that the use of these sex-based constructs in personality testing gives them more weight than is justified by either empirical data or theory.

Descriptive Variable: Myers-Briggs Type Indicator

Lanyon and Goodstein (1982) defined personality as "an abstraction for those enduring characteristics of the person which are significant for his/her interpersonal behavior" (p.35). Allport (cited in Lanyon & Goodstein, 1982) insisted that personality is what the person really is, i.e., that it involves what is most typical and deeply characteristic of the individual. Not only will personality assessment lead to a better understanding of the person, hopefully it will enable us to make some predictions about the future behavior of that person in specific situations.

The MBTI was selected for this research because it does

not classify as right/wrong or good/bad. The typology of Carl Jung classifies people into groups, each of which has characteristic strengths and weaknesses. A second reason for selecting this instrument was that it had not been previously used on battered women. Would there be a type or preference which would have a more difficult time making the break from an abusive relationship? Although there are sixteen different combinations of preference type, this research paper focused on the Thinking/Feeling function.

When thinkers make decisions, they prefer to be analytical, detached, logical, and driven by *objective* values as they reach a conclusion. Feeling people are driven by an interpersonal involvement which comes from *subjective* values (Kroeger & Thuesen, 1988).

Kroeger and Thuesen believe that the decision-making preference is the most significant of the four preferences when it comes to intimacy. Thinking types want to *understand* intimacy; feeling types are content *experience* intimacy. Keirse and Bates (1984) make the point that although the feeling types are seen as more emotional, this is not the case in actuality. Thinking types do experience emotions but tend to make their decisions using an impersonal approach, giving priority to objective criteria, while the feeling person makes choices in the context of the personal impact on the people around him/her.

Myers and Myers (1980) write that, "thinkers are at their

best with the impersonal, and they are the most able to handle things that need to be done impersonally " (p. 67). Leaving a relationship is often difficult even when that relationship is abusive. Thinkers value logic above sentiment; feelers value sentiment above logic. Thinkers contribute to the welfare of society by the intellectual criticism of its customs and beliefs, and by the exposure of wrongs. Feelers contribute to the welfare of society by their loyal support of traditional values and good works.

Malloy (1986) conducted an investigative study examining several different psychological and demographic factors to determine which played a significant role in the decision to return or not return to the abusive partner. The results indicated that the women who had not returned to the abusive relationship were more able to tolerate not having a partner, more able to not blame themselves, were more able to keep busy, and were more likely to have used cognitive restructuring in coping with the last violent episode. These characteristics seem to be more in keeping with the thinking types than the feeling types.

The Adjective Check List was used in a study (Kuhl, 1984) which investigated the need structures of battered women and the level of abuse experienced. It was found that abused women were cautious, felt inadequate, were dissatisfied with current status, and avoided confrontations. There were not positive correlations, as hypothesized, for the scales of

Femininity, Masculinity, Abasement, and Nurturance.

After a detailed study which involved listening to women and girls resolve moral dilemmas in their lives, Gilligan (1982) traced the development of a morality organized around notions of responsibilities and care. The responsibility mode focuses on caring, responsibility, and nurturance in accordance with the needs of others. According to Gilligan, men see their relationships with other people as part of a hierarchy in which some people have more influence and power than others. Men define themselves in terms of separation and autonomy. Women, to a large extent, have a conception of self that is defined in terms of their relationships and connections to others. Women tend to see "life as dependent on connection, as sustained by activities of care, as based on a bond of attachment" (p.57).

This theme of devoting oneself to the care and empowerment of other while remaining "selfless" has been noted by both Gilligan and Miller (1986). Women worry that if they develop their own power that it would be at the expense of another. Yet, to survive an abusive relationship, the time will come when it is necessary to break the connection, not to be selfish but to survive. Surviving may depend on the ability to analyze the situation based on the facts, not the sentiment.

Schweizer (1986) utilized a phenomenological analysis to provide a framework for studying the social situations of

battered women. Schweizer's premise was that battered women live in "life-worlds" in which they define their abuse in such a way that permits them to remain in their abusive relationships. If a woman is to leave the batterer, her original definition of abuse must be brought into question. Her subjective reality regarding the abuse must be altered until she has a perspective based on the facts of the situation. Schweizer's findings suggested that the subject women were indeed socialized into life-worlds that encompassed abuse and that until the subjective definition had undergone a change the women would be unable to leave. The women who did alter their definition of abuse were able to terminate the relationship.

Cognitive development scholars Clinchy and Zimmerman (1985) and Belenky, Clinchy, Goldberger, and Tarule (1986) have described several approaches to "knowing," two of which are important to battered women and also the T/F difference on the MBTI. One approach to knowing is based on a method of thinking which uses objective criteria to analyze new information (Perry, cited in Swift, 1987). "Separate" knowing analyzes the information with what is already known, notes any difference, and tests it against established standards. "Clinchy and Zimmerman (1985) call this type of knowing 'separate' in reference to the autonomous nature of the self in making comparisons and seeing differences" (cited in Swift, p.11).

"Connected" knowing involves not separating the self from what is to be known but entering into a new frame of reference in order to understand what is to be known. This type of connected knowing leads to empathy. Clinchy and Zimmerman (1985) use an example of students studying a poem to clarify the two different methods of knowing. Those students using separate knowing ask themselves what standards are being used to evaluate their analysis of the poem. This orientation is toward impersonal rules and procedures. The students using the connected method of knowing this poem ask themselves what the poet is trying to say to them; this orientation is to place the self in the poem to understand the meaning.

Although both separate and connected knowing are used by both sexes, it is the thesis of these scholars that connected knowing is more often found in women. "The significance of this difference in understanding situations of family violence is that the woman is more likely to feel and relate to the pain of the other (i.e., the male partner) (Swift, 1986, p.11). This capacity for feeling the other's pain may lead to a decision to not terminate a relationship. Since women have been socialized to value connected knowing, if a woman's typology (Feeling) further inclines her to value relationships, she will have a more difficult time than the impersonal Ts in terminating a destructive relationship.

Critique

The Adjective Check List has no reliability or validity

so any findings are speculative. Malloy utilized seven inventories to gain her information. This number of inventories is too costly in monetary terms and in staff time for most shelters. Schweizer used a small sample for her data; in addition in-depth interviews are not practical for shelter staffs.

The work of Gilligan (1982) and the works cited in Swift (1987) are not based on empirical studies. None-the-less they are valuable contributions to the field of literature which explain and clarify the experiences of women. Based on these theories, this study hopes to gain new insight to the understanding of battered women by using empirical instruments.

Demographic Variable: Times Previously Separated

There are several responses that domestic violence workers would like to give in response to the question, "Why does she stay?" One response is "Why is he allowed to stay? Why does she have to take the kids and go to a shelter when she is the one being battered?" A second response is "Social and legal forces are working to prevent her from leaving, beginning with inadequate protection from the police and court system."

A third response that more directly answers the question is the fact that she doesn't stay. Okun (1986, p.55) cites five studies which found that from 67% to 88% of battered women had left their mates for a day's time or more on at

least one occasion. The majority of these separations were brief, lasting two weeks or less.

Gayford lists the following reasons the women returned (when they did): 1) husband's promise to reform, 27%; 2) husband's threats and/or continued violence, 17%; 3) nowhere else to go, 14% 4) concern for children still at home, 13%; 5) felt love or sorrow for husband, 8%. Roy also finds hope for reform, nowhere to go, fear of reprisals, and concern for the children to be the four most common reasons victims go back. Hilberman and Munson emphasize reasons of financial dependence, which Roy found to be the fifth most common reason. Pagelow similarly found in her study that hope for reform, continued violence, nowhere to go, and inadequate resources were the four most common reasons for recombining with the batterer (Okun, 1986, p.55).

Okun (1986) makes the point that women rarely quit their violent relationship after one abusive episode. It takes repeated beatings, followed by repeated promises to reform before the woman permanently leaves the relationship. Dobash and Dobash (1979) state, "the twin questions of why women stay in or fail to leave violent relationships to a large extent miss the point: they [assume]...that a woman engages in either one behavior or the other. Most women engage in both..." (p.144).

Walker (1984) found in her study of over 400 women that

they left from three to five times before severing the relationship. She also found that the length of a battering marriage was six years which, according to the United States 1980 Census count, is the same length of an average marriage. Rosewater and Walker (1985) state that it takes a while to make the decision to leave; some women must try it several times before they are convinced that they cannot control the batterer's behavior.

It has also been the experience of this researcher that if it is the shelter resident's first separation from the batterer, that she will return to the abusive relationship. It is for this reason that this demographic variable is utilized in this research.

Critique

The studies mentioned above can all be critiqued for various reasons such as they are not random, etc. Certainly, the majority of empirical and theoretical research on battered women gives conflicting data. Yet, this process of leaving seems to be a consistent factor which has not been empirically tested. This study overcame the previous omission by including this seemingly important factor.

Supplementary Research

"Intelligence" is one of those words which everyone uses as though there were consensual validation on its meaning. But, to date, no one has been able to define it to the

satisfaction of everyone else. S. S. Colvin (cited in Sternberg, 1985) defined intelligence as learning or the ability to learn to adjust one's self to the environment. L. M. Terman (cited in Sternberg, 1985) states that intelligence is the ability to carry on abstract thinking. Thorndike (cited in Sternberg, 1985) defined intelligence as the power of a good response from the point of view of truth or fact. Other definitions include "attainment of relevant goals in specified environments, using appropriate means and resulting in positive developmental outcomes" (Ford, 1986, p.183) and "the ability to use knowledge effectively: what you can do with what you know" (DeAvila & Duncan, 1985). R. B. Cattell (cited in Kerlinger, 1986) distinguishes between fluid and crystallized intelligence. He states that fluid intelligence is assumed to be innate, nonverbal, and applicable in a wide variety of contexts. Crystallized intelligence reflects the skill and specific abilities that one acquires as a result of learning. There is general agreement that a part of intelligence is the ability to adapt one's behavior on the basis of experience, making that behavior more effective for coping with one's environment.

Seymour Epstein (1989) states that a not unreasonable definition of intelligence is that it is the ability to solve problems. It would seem to follow, therefore, that a high intellectual ability would correlate significantly with success in living. Yet in a follow-up study of one hundred

Harvard students to midlife, Vaillant (cited in Epstein, 1989) found that intellectual ability was not significantly associated with any measures of adjustment such as mental health, physical health, success in work and family relationships. A second long term predictive study conducted by Felsman and Vaillant (cited in Epstein, 1989) followed 456 core city men from adolescence to midlife. It was again found that IQ was a poor predictor of success in living. Other personality characteristics such as ego-strength and demonstrations of early practical competence were much better predictors. While the results of research conducted on relating work performance to IQ have been mixed, the evidence clearly indicates that intelligence, as measured by conventional IQ tests, is often unrelated to success in many important life endeavors and in practical problem solving. Epstein does not deny that a full scale intellectual ability is important to job success, but he states that other types of knowledge and abilities are equally important in life skills.

For example, Epstein makes the point that in many studies and analyses of practical intelligences such as those presented by Sternberg and Wager (1986) i.e., intelligence on the job, in daily life, etc., there is almost no consideration given to the place of emotion relative to coping with the problems of life. Epstein states that "a moment's reflection reveals that how individuals manage their many emotions is a major factor in determining how effectively they can use their

intellectual ability" (p.5). A person may display great ability to function well in the quiet of an office but may not function well during times of stress or in personal relationships.

In his class on emotions and self-concept at the University of Massachusetts, Epstein had his students keep a daily log of their most positive and negative experiences. He was amazed at the extent to which academically bright students thought in ways which were counter-productive and self-defeating. He was also impressed with the degree to which these maladaptive processes are resistant to correction by rational persuasion.

In his attempts to understand practical intelligence, Epstein was influenced by his own theory of personality, Cognitive-experiential self-theory (CEST), which he has been developing over ten years. According to CEST:

...there are three semi-independent systems: a rational system, an experiential system, and an associationistic system. The rational system operates according to socially established rules of logic and consideration of evidence and functions mainly at the level of conscious awareness. The experiential system has its own rules of inference and evidence and operates primarily at the preconscious level. Relative to the rational system, it is more holistic, more loosely organized, more categorical, employs metaphor and imagery to a greater

extent, is experienced passively and as self-evidently valid, and is intimately associated with emotions. Overall, it is oriented toward immediate action and processes information rapidly and more crudely than the rational system. The associationistic system, which can be observed in altered states of consciousness such as dreams, functions at an unconscious level of awareness and corresponds, to a large extent, to Freud's conceptualization of primary process thinking.

It is assumed in CEST that everyday perception and behavior, which is large automated, is mainly organized and directed by the experiential conceptual system. However, if people are asked to explain their behavior, they will usually attribute it to their rational system, i.e., they will "rationalize" it. Since behavior in everyday life is determined mainly by the experiential system, experiential intelligence should play a vital role in determining effectiveness in living. It was to this end that the Constructive Thinking Inventory (CTI), a self-report measure of automatic constructive and destructive thinking, was developed (p.5).

After observing that a 'disconcertingly' large number of his students did not view typical life problems such as love relationships, concerns over failure, and relationships within the family as problems to be solved through conceptual analysis and behavioral experimentation, Epstein realized that

there was not an adequate instrument with which to measure constructs such as self-negating stereotypic thinking, over-reacting to and overgeneralizing from minor events, and irrational blaming of self. Other examples of destructive thinking are needless worrying, polarized thinking, inappropriate rules, and catastrophizing. To the extent that some battered women choose to remain in a battering relationship, one cannot help but wonder if their decision-making process is based, at least in part, on destructive thinking.

The CTI has the following categories: Global Constructive Thinking, Emotional Coping, Behavioral Coping, Categorical Thinking, Superstitious Thinking, Negative Thinking, and Naive Optimism. The Global CTI scale is a bipolar scale which measures acknowledgement of constructive thinking as well as the denial of destructive thinking. High scores on this scale indicate that the person is accepting of self and others and is biased toward interpreting events positively. In spite of this tendency to be optimistic, their world view is tempered by reality. They do not rely on superstitious or other forms of magical thinking, they do not engage in making over-generalizations. Their automatic thinking helps them to behave effectively in the world, to cope effectively with negative emotions, and to feel good about themselves and others.

The Emotional Coping bipolar scale refers to the tendency

not to take things personally, not to worry excessively about failure and disapproval, and not to be sensitive to disapproval. This scale is important to this study because the traditional supports to which people turn when confronted with life changes are frequently absent for the battered woman. Since it is the spouse or partner who inflicts the pain, she not only suffers the pain of the attack but she also loses the support of her primary relationship as well. In addition, she is blamed by the batterer for his own violent behavior. Further, friends and relatives often encourage her to remain in the relationship. "The assumption that the kin network will be opposed to violence is not necessarily correct" (Straus, 1980, p. 246). Even the divine law of God is invoked to keep the woman in the battering relationship. Pagelow (1982) identified the clergy as the institutional resource most frequently contacted by the battered woman. Yet a survey of Protestant clergy in the United States and Canada found that:

One-third of the respondents felt that the abuse would have to be severe in order to justify a Christian wife leaving her husband, while 21% felt that no amount of abuse would justify a separation... . Twenty-six percent of the pastors agreed that a wife should submit to her husband and trust that God would honor her action by either stopping the abuse or giving her strength to endure it (Adsdurf, 1985, p. 10, cited in Swift, 1987).

Thus, a woman who chooses to leave the abusive relationship risks the disapproval of her primary relationship, her family, and her clergy person.

High scorers on the Behavioral Coping scale think in ways that promote effective action. These people maintain an optimistic approach to life which helps when facing challenges and when rebounding from failures. Action-oriented, focusing their energy on planning and carrying out effective actions, these people do not hold grudges or dwell on past injuries. This scale is important to this study since the early research indicated that battered women who remained in abusive relationships had learned helplessness (Walker, 1984). A woman with a high score on this scale would, in theory, behave in an opposite manner from one who had learned helplessness.

The bipolar Categorical Thinking scale measures the tendency to think in rigid or extreme ways, and the tendency to be judgmental and intolerant of others. These high scorers believe that there is only one right way to do anything, they judge others as being for or against them, and they classify people as good or bad.

Superstitious thinking refers to conventional superstitions (don't walk under a ladder) as well as personal superstitions (talking about an event which you want to occur will keep it from happening). This bipolar scale includes beliefs in esoteric and questionable phenomena, i.e., that ghosts exist and that astrology has a valid basis.

Tendencies toward "gloom and doom" are measured on the Negative Thinking scale. These high scorers interpret the past, present, and future, as well as self and others, with a negative bias. They tend also to think magically and categorically and in ways that are not conducive to effective action.

Naive Optimism, a unipolar scale, refers to gross overgeneralizations following a positive outcome. Also measured are stereotypic, simplistic beliefs such as that everyone should love their parents and that all life's challenges can be overcome with willpower. In addition, high scorers on this scale also interpret events in an unrealistic, stereotypic, optimistic way. This scale is important to this study because of Walker's (1984) tension reduction cycle theory of violence which evolved from her detailed landmark study of 120 women. Walker discovered that battered women are not abused constantly, and that the violence is not inflicted at complete random. Presented as a schema for conceptualizing the violent conjugal relationship (Okun, 1986), the battering cycle has three distinct phases, the length of which vary widely and from couple to couple.

The first phase is the tension-building phase. During this phase minor battering incidents may occur. The woman attempts to handle these incidents using whatever techniques have proved successful previously such as nurturing, avoidance, pleasing him, or at least not further aggravating

him. Because she sometimes succeeds she begins to believe that she can control the battering. But as the tension escalates it becomes more difficult for previous coping mechanisms to work. At this point she starts to withdraw to protect herself from the psychological pain and stress. Despite her attempts at adaption, he senses her withdrawal and hovers over her constantly. The tension between the two continues to rise until it become unbearable.

The second phase, that of acute battering, becomes inevitable unless there is intervention. If there is no intervention, the batterer justifies his rage by saying that she drove him to it or that she had it coming, or that he was trying to teach her a lesson. Researchers (Straus, Gelles, & Steinmetz, 1980, Walker, 1979) agree that the trigger for the violence is rarely the behavior of the woman; it is instead an external event or the internal state of the batterer. This acute phase may last from two to twenty-four hours although some women have reported that the battering will continue for a week or more.

Phase three, the loving contrition or honeymoon phase, usually begins with both the victim and the batterer in a state of shock, denial, and disbelief that the violence really happened. The tension has dissipated; the batterer realizes that he has gone too far and becomes extremely loving and contrite. He pleads forgiveness, promising never to hit her again. The victim, wanting to believe him, may believe that he

will never be violent again. Gayford's (1975) study of one hundred battered wives provided support for Walker in that the primary reason women gave for returning to the batterer was that the husbands pleaded and promised to reform. This phase provides reinforcement for the woman to remain in the relationship.

It has been the observation of this researcher, based on eight years experience working at a shelter, that a woman comes to the shelter immediately after an acute battering phase, just prior to the beginning of the honeymoon phase. Although the husband/boyfriend does not know the location of the shelter, the 24-hour-a-day hotline number is widely published. After the batterer has searched the homes of friends and family, the phone calls to the shelter begin. The observation of this researcher, supported by the data of Walker (1984), indicates that immediately after the battering the woman is convinced that she must stop being a victim and take charge of her life. But once she talks to the batterer, her conviction wavers. It is theorized that the Naive Optimism scale of the CTI will distinguish between those women who believe the batterer during the honeymoon phase when he swears that he will never hit her again and those women who will use a more objective standard to analyze the events which have occurred in her life. The former will interpret events in an unrealistic optimistic way while the latter will compare what has previously happened with what is happening now, note

the difference or lack thereof, and interpret the events in a critical objective manner. Prange (1985), in a dissertation study on battered women and why they return to abusive relationships, stated that "the most relevant finding was the incongruity between the woman's expectancy to control her partner's battering behavior and the knowledge that she in fact does not have control" (p.4026).

Inferences From This Study

The CTI experimental scale added new dimensions to the increasing knowledge base about battered women by offering an opportunity to tap new sources of the psyche. These areas had previously been unexplored in this manner. Traditional measures of coping styles tend to be unidimensional and therefore lack the complexity and richness that characterize actual appraisal and coping processes (Byrne, cited in Epstein, 1990). Epstein's CTI has promise as an instrument that can assess at a relatively microanalytic level adaptive and maladaptive coping strategies without sacrificing the behavioral and cognitive richness of these processes.

Relation of Research to the Problem

Matlin (1987) states that stereotypes are a structured set of beliefs that involve a pre-established list of characteristics. Stereotyping is strongest when we don't have precise knowledge and must rely on common knowledge. These

biased perceptions tend to exaggerate the similarities within a group. To the extent that battered women constitute a 'group' this research explored areas beyond the myths of common knowledge and gained more precise knowledge about how these subject women differ from each other. More specifically, by using this combination of instruments plus one demographic variable, some distinctive patterns did emerge between those women ready to terminate the abusive relationship and those women who returned to the abusive relationship.

CHAPTER III

Collection of Data

Population and Selection of Sample

It is impossible to give an accurate estimate of the numbers of battered women. It is a fact, however, that ten years ago there were four shelters for battered women nationwide, and today there are over one thousand (Gelles & Straus, 1988). The population used in this study were residents of the shelter provided by the Virginia Peninsula Council on Domestic Violence. This shelter serves an area of over 250 square miles. To be admitted to the shelter the woman must be presently in or escaping from a relationship which is dangerous to her safety and well-being, and, further, must be approved for admission by trained staff.

Descriptive Variables

Data Gathering

Fifty residents of the Virginia Peninsula Shelter for Battered Women were asked to complete a demographic information sheet, the California Psychological Inventory-Revised (CPI-R), the Myers-Briggs Type Indicator (MBTI), and the Constructive Thinking Inventory (CTI). The women were

assessed across several dimensions to see if distinctive patterns discriminate between those who chose to return to the abusive relationship and those who chose not to return to the abusive relationship. The women were asked to complete the packet of data gathering instruments between the first 24-48 hours after being admitted to the shelter.

Measurement Instruments

Demographic Data

Demographic data was gathered on the following factors: age, race, married/not married, length of relationship, whether or not currently employed, whether or not currently receiving Aid to Dependent Children (ADC), whether or not in public housing or section eight housing, highest grade completed in school, any criminal or civil charges filed against the abuser, times previously separated, whether or not this is the first time in the shelter, and whether or not there a requirement for medical care in the most recent violent episode. There was no demographic discrimination on income level or severity of violence.

California Psychological Inventory - Revised

The first data collection instrument was the California Psychological Inventory-Revised (CPI-R). The CPI-R uses folk concepts as a basis for understanding and predicting the behavior of both self and other. The 1987 revision of the

CPI-R has 20 scales and three validity scales. Using the scales singly or in combination, the CPI-R gives a multidimensional or multiphasic description of normal people (Lanyon & Goldstein, 1982).

Reliability coefficients for the CPI-R scales were gathered from male and female college and high school students on each of the 23 scales. The array of medians derived from these calculations ranged from a low of .53 for Empathy to a high of .80 for Self-Control, with a median of .70. Gough does not make any claim that the scales define factorially homogeneous dimensions. Despite this seeming lack of precision, the reviews of the CPI-R have been positive. In a critical review Gyther (cited in Lanyon and Goldstein, p.86) indicated that the major research effort with the CPI-R has been in forecasting performance criteria.

Baucom (1985) summarized his review of the CPI-R for the Ninth Mental Measurements Yearbook by stating that while the CPI-R is not a perfect instrument, research findings indicate that the scales generally measure what their titles suggest. Gough, the author of the inventory, needs to focus more research on the profile configurations, but at present there is not a better instrument on the market for measuring similar constructs.

Mazen (1985), in a study of "Personality Profiles of Noncollege-degreed Women in Male and Female Typical Occupations," found five personality variables which the CPI-R

differentiated very significantly between women in female typical occupations (FTO) and male typical occupations (MTO). This is used as a comparison since being battered is typically female. Mazen found that the women in MTOs were: (1) more dependable, tactful, patient, and realistic (community scale); (2) more aggressive, persistent, and planful, confident, and possessive of leadership initiative and potential (dominance scale); (3) less impulsive, excitable, and uninhibited (self-control scale); (4) less conventional, shy, stereotyped in thinking, and restricted in interests and outlook (capacity for status scale); and (5) more ambitious, outgoing, hard-headed, masculine and restless (femininity scale).

Myers-Briggs Type Indicator

Based on the typology of Carl Jung as interpreted primarily by Isabel Briggs Myers, the MBTI is probably the most widely used instrument for normal populations in the areas of counseling and personality testing (Ninth Mental Measurements Yearbook). The MBTI manual stresses that the MBTI does not measure people but sorts them into groups.

Subjects are assessed on the two attitudinal opposites of Introversion and Extraversion. Information is received through Sensation or Intuition. The information is processed through the functions of Feeling or Thinking. The Judging/Perceiving index assigns a preference to one or the other two mental functions. The MBTI Manual presents validity

data which indicates that the MBTI correlates significantly with other measures such as SAT performance and selected Strong Vocational Interest Blank Scales. Validity data are also presented which show that self-ratings of type and the assignment made by the instrument have much closer correspondence than would be expected by chance.

Tzeng, Outcalt, Boyer, Ware, and Landis (1984) did four extensive psychometric analyses of the MBTI. Using 444 college students and clerical employees as subjects, responses to the 95 scoring items were recoded to represent the condition of endorsement, rejection, or omission. Subjects were divided into male, female, and both sexes. No sex differences were found in any of the analyses.

The positive results of the four major analyses are as follows:

1. The reliability (alpha) coefficients for the scales were rather high (.74-.84).

2. Factor analysis on intercorrelations among the 95 items yielded clear simple structures with the empirical factors matching almost perfectly with the theoretical scales of the MBTI.

3. Correlations, computed from raw scores on the eight preference poles of the four scales, indicated a strong negative relationship between the two dichotomous poles of each of the MBTI dimensions.

4. Interscale correlations, computed from the MBTI

difference scores as well as the type scores, yielded insignificant correlations between the four MBTI scales. Perfect correlations of 1 were obtained between the different and type scores of each scale. These results strongly suggest that because each scale is proved to be unidimensional, a person's profile on each scale can be represented by the type score alone.

The authors concluded by stating that their study provides empirical evidence at the item level that the MBTI can be used with confidence to distinguish the sixteen personality types in terms of the four dichotomous dimensions.

John Carlson (1985) reviewed two dozen recently published studies that examined reliability and validity of the MBTI. The several assessments of the test-retest and split-half reliability of the standard Form F and the shorter Form G have yielded generally satisfactory correlations for all four scales. Although the validity of the MBTI remains in somewhat greater question than the reliability, recent studies have yielded support for research hypotheses, thus increasing the evidence for the construct validity.

One such study correlated the MBTI with various modes of conflict handling. Killman and Thomas (cited in Carlson, 1985) administered three tests to college students to assess their methods for handling conflict. The dimensions were competing, collaborating, compromising, avoiding or accommodating. The MBTI judgement of Feeling was

significantly related to the accommodation mode of handling conflict. In addition, extroverts tended to be those who, when combining scores of the conflict-mode tests, were integrative, assertive and cooperative. The authors concluded that the Jungian dimensions are useful "in documenting and explaining psychological bases of interpersonal behavior" in conflict situations (Killman & Thomas, cited in Carlson, 1985, p.979).

Research Design

This research was descriptive in nature. The dependent variable was the decision the woman made concerning whether or not to return to the abusive relationship. The independent variables were the scores from the three instruments utilized in this research plus the demographic variable of how many times, if any, she had previously left the batterer.

The independent variables obtained from the CPI-R, the CTI, MBTI, and the demographic variable of times previously separated are continuous or interval. The inventory scores are attribute values in that they are human characteristics and were not manipulated. The dependent variable is categorical - to return or not return.

Inferential statistics are used when a researcher wishes to test hypotheses or otherwise make generalizations about data findings to a population.

This design is non-parametric because the dependent

variable is not a continuous categorical variable.

A discriminant function is a regression equation with a dependent variable that represents group membership. The function maximally discriminates the members of a group, it tells us to which group each member probably belongs. In short, if we have two or more independent variables and the members of two groups, the discriminant function gives the "best" prediction, in the least-squares sense, of the "correct" group membership of each member of the group sample (Kerlinger, 1985, p.562).

Specific Hypotheses

1. The first research hypothesis was that those subjects who had the feeling preference in their MBTI would return to the abusive relationship to a significantly greater degree than those with the thinking preference in their MBTI.

2. The second research hypothesis was that the women who chose not to return to the battering relationship would score significantly higher on the CPI-R scales of Dominance and Independence and lower on the Femininity/Masculinity scale than those who chose to return to the abusive relationship.

3. The third research hypothesis was that those who chose not to return to the battering relationship would score significantly higher on the CTI scales of Emotional Coping and Behavioral Coping and significantly lower on the scale of

Naive Optimism.

4. The fourth research hypothesis was that those subject women who have not previously separated from their partner or have separated only one or two times would return to the abusive relationship to a significantly greater degree than those who had previously left three or more times.

Statistical Procedure

T-tests were employed in analysis of data. Comparisons were made between the return group and the nonreturn group. The return group had an n of 23; the nonreturn group had an n of 27.

CHAPTER IV

Statistical Analysis

A *t*-test was used to determine whether or not there was a significant difference between the performances of the two subject groups on the variables of Dominance, Independence, Feminine/Masculine, Emotional Coping, Behavioral Coping, Naive Optimism and times previously separated.

A table of frequency was used to test the Myers-Briggs Type Indicator Thinking/Feeling function.

The variable of times previously separated was computed two ways. The actual number of times previously separated was computed in one statistical analysis. In a second analysis times previously separated was converted into a dichotomous variable of 1 (TPS = 0, 1, or 2) and 2 (TPS = 3 or more times).

Table 5 at the end of this chapter contains the results of eight independent variables by case number of the return group. Table 6 contains the results of the nonreturn group.

RESULTS OF FIRST RESEARCH HYPOTHESIS

The first research hypothesis was that those subjects who had the feeling preference in the MBTI would return to the

battering relationship to a significantly greater degree than those who had the thinking preference in their typology. Of the 54% (n=27) subjects who did not return to the batterer 59% (n=16) had the feeling preference and 41% (n=11) had the thinking preference. Of the 46% (n=23) who did return to the abuser, 43% (n=10) preferred the feeling function and 57% (n=13) preferred the thinking function. None of these numbers are statistically significant (See Table I). Thus the first hypothesis is rejected.

Table 1 Thinking/Feeling Function

	<u>Percents of Total</u>		Total	N
	F	T		
NR	30.00%	24.00%	54.00%	27
R	18.00%	28.00%	46.00%	23
Total%	48.00%	52.00%	100.00%	50
N	24	26	50	

RESULTS OF SECOND RESEARCH HYPOTHESIS

The second research hypothesis was that women who chose not to return to the battering relationship would score significantly higher on the CPI-R scales of Dominance (Do) and Independence (In) and significantly lower on the Femininity/Masculinity (F/M) scale than those who chose to return to the battering relationship. The return group means were 46.69 on Do, 47.73 on In, and 44.87 on the F/M scale. The nonreturn group means were 50.33 (Do), 48.77 (In) and

46.18 (F/M). Bartlett's test for homogeneity of variance of group variances for Do was $p=.52$, for In $p=.20$, and for F/M $p=.42$. These p values are not statistically significant. Thus the second research hypothesis is rejected.

Table 2 California Psychological Inventory - Revised

	Dominance	Independence	Fem/Mas
Return Group	46.69	47.73	44.87
Nonreturn Group	50.33	48.77	46.18
Normative Group	50.00	50.00	50.00

RESULTS OF THIRD RESEARCH HYPOTHESIS

The third research hypothesis was that those who chose not to return to the battering relationship will score significantly higher on the Constructive Thinking Inventory scales of Emotional Coping (EC), Behavioral Coping (BC) and significantly lower on the scale of Naive Optimism (NO). The EC mean for the return group was 74.21 with a standard deviation of 22.49. The EC mean for the nonreturn group was 86.37 with a standard deviation of 16.50. The overall mean equaled 80.78 with a SD of 20.22. The T statistic equals -2.04 , $p < .033$. On the BC scale the return group mean was 89.13, SD = 15.73. The nonreturn mean was 96.77, SD = 10.54. The overall mean equals 93.26 with a pooled within groups standard deviation of 13.17. The T statistic for this is -2.04 , $p < .04$. The NO mean for the return group was 50.08, SD

= 10.01. The mean for the nonreturn group was 47.96, SD = 6.32. The overall mean was 48.94, SD = 8.21. The scores between the two groups on the Naive Optimism scale were in the predicted direction but were not stastically significant ($p=.36$). Thus, the third research hypothesis is accepted for the scales of Emotional Coping and Behavioral Coping but rejected for the scale of Naive Optimism.

Table 3 Constructive Thinking Inventory Group Means

	Emotional Coping	Behavioral Coping	Naive Optimism
Return Group	74.21	89.13	50.08
Nonreturn Group	86.37	96.77	47.96
Sample Group	80.78	93.26	48.94
Normative Group	77.64	86.60	45.34

RESULTS OF FOURTH RESEARCH HYPOTHESIS

The fourth research hypothesis was that women who had previously left the batterer zero, one, or two times would return to the abusive relationship to a significantly greater degree than would women who had previously left three or more times. The return group mean was 1.91, SD = 1.67. The nonreturn group mean was 2.25, SD = 1.55. The overall group mean was 2.10, SD = 1.60. This finding was in the predicted direction but was not statistically significant ($T = -0.75$, $p = .45$). Thus, the fourth hypothesis is rejected.

Please see Table 4 on the following page.

Table 4 Times Previously Separated

	Return	Nonreturn
N of Cases	23	27
Minimum	0.00	0.00
Maximum	6.00	6.00
Mean	1.91	2.25
Standard Dev	1.67	1.55

Table 5 Variable Results by Case Number for Return Group

Case	TPS	Do	In	F/M	EC	BC	NO	T/F
4	4	44	56	34	109	111	55	T
5	1	22	28	66	41	81	58	F
7	6	40	50	53	64	86	47	T
8	2	28	38	50	66	78	35	F
9	2	58	44	53	55	74	49	T
10	3	60	50	40	90	103	43	T
11	2	48	40	64	67	126	61	F
12	0	36	38	60	46	73	58	T
14	2	45	45	40	86	96	48	T
21	0	44	50	54	43	68	46	F
28	4	60	48	28	86	85	44	T
29	3	58	64	40	96	105	42	T
30	1	50	48	47	47	73	52	F
31	0	48	38	32	62	75	51	F
32	1	40	48	64	95	100	44	F
33	0	28	42	50	66	82	49	T
35	1	60	58	32	108	103	46	F
39	0	44	46	44	76	86	40	F
43	5	48	64	28	102	99	49	T
25	1	36	36	60	60	65	46	T
46	2	48	60	20	101	103	40	T
47	3	60	56	28	89	99	55	F
48	1	64	58	44	84	89	51	T

TPS = Times Previously
Separated
Do = Dominance Scale
In = Independence Scale
F/M = Femininity/Masculinity
Scale

EC = Emotional Coping Scale
BC = Behavioral Coping Scale
NO = Naive Optimism Scale
T/F = Thinking/Feeling
Function

Table 6 Variable Results by Case Number for Nonreturn Group

Case	TPS	Do	In	F/M	EC	BC	NO	T/F
1	1	42	46	40	81	84	49	F
2	3	52	54	44	84	96	43	F
3	2	66	62	37	77	93	38	F
6	4	46	42	50	98	90	44	T
13	1	42	42	66	83	98	58	T
15	1	56	50	40	96	116	60	T
16	2	52	54	40	103	99	35	T
17	3	60	56	22	95	97	45	T
18	1	52	46	34	59	92	57	T
19	4	38	40	40	70	89	51	F
20	0	44	42	44	83	80	48	T
22	4	64	60	50	102	108	50	F
23	0	34	34	63	43	83	52	F
24	1	54	56	40	118	118	60	F
26	6	56	56	52	74	100	49	F
27	1	46	48	44	101	107	55	F
34	1	68	58	44	92	106	51	T
36	1	56	58	20	109	103	53	F
37	4	34	38	60	72	76	43	F
38	1	57	46	42	87	101	41	T
40	3	50	54	37	78	94	49	T
41	3	58	54	47	111	112	45	T
42	3	38	42	53	84	87	53	F
44	5	36	40	50	84	93	41	F
45	1	60	46	50	90	88	41	T
49	2	40	46	56	67	101	45	F
50	1	58	50	72	91	102	49	F

CHAPTER V

Analysis of Data

"Factorial design is the structure of research in which two or more independent variables are juxtaposed in order to study their independent and interactive effects on a dependent variable" (Kerlinger, 1986, p.322).

"In nonexperimental research, direct control is not possible; neither experimental manipulation nor random assigned can be used. ... Investigators must take things as they are and try to disentangle them" (Kerlinger, 1986, p.349).

Self-selection occurs when the members of the group being studied possess a characteristic, or, in this case, an experience related to the research problem. Battered women, as a class of women, obviously possess traits, characteristics, life situations, values, and all other possible and probable independent variables extraneous to the research problem but which influence the dependent variable in the problem. Assignment to the two groups, return or not return, was not random; thus there was always a possibility for other variables to influence the decision. These subjects were self-selected into the sample group by virtue of a common experience over which they had no control, and then self-selected into a comparison group by the choice they made to

return or not return to the abusive relationship.

The purpose of this study was to ascertain if it were possible, using this set of particular variables, to predict which subjects would return to the battering situation and which subjects would not return.

The theory upon which this research was based is the multimodal therapy of Arnold A. Lazarus. As stated in Chapter I, multimodal therapy has as its foundation the necessity of assessing a person across the seven modalities which encompass virtually all aspects of every subject's complex and intertwined life. As this research progressed and the decisions of the subjects were closely monitored, the value of assessing across all dimensions of the BASIC-ID became even more obvious.

FIRST RESEARCH HYPOTHESIS

The first research hypothesis was that those subjects who had the feeling preference in the MBTI would return to the battering relationship to a significantly greater degree than those who had the thinking preference in their typology.

According to Isabel Myers (1962) about 75% of the general population in the United States prefers Extraversion, about 75% prefer Sensing, 65% of females prefer Feeling, and 55% to 60% of the general population prefer Judging (Myers and McCaulley, 1985).

In this research population the Introverts outnumbered the Extroverts 56% to 44%. The Sensing/Intuition distribution was closer to the norm with 82% S and 18% N. The shelter T/F population was skewed with F=48% and T=52%. The Judging/Perceiving scale was normal with Js representing 58% of this sample. See Table 7.

Table 7 Distribution of MBTI Preferences by Populations

	EI	SN	TF	JP
Shelter	44% E 56% I	82% S 18% N	52% T 48% F	58% J 42% P
General Female	75% E 25% I	75% S 25% N	35% T 65% F	55-60% J 40-45% P

When the original proposal was submitted to the College of William and Mary, the first hypothesis stated that those subjects with the NF preference would return to a significantly greater degree than those with the ST preference. After 20 inventories had been completed and returned to this researcher with no Ns it became apparent that the Ns who comprised 25% of the general population either never made it to the shelter and/or did not complete the inventories. A request to use only the T/F function was approved by this researcher's committee. A final analysis of data showed that only 18% of the subjects indicated the N preference with 6% of the total sample being NFs.

The hypothesis concerning the T/F preference was not

supported statistically. Kroeger and Theusen (1988) state that if you are a thinker you:

- * are able to stay cool, calm, and objective in situations when everyone else is upset.

- * would rather settle a dispute based on what is fair and truthful rather than what will make people happy.

- * are more firm-minded than gentle-hearted

- * pride yourself on your objectivity despite the fact that some people accuse you of being cold and uncaring.

- * don't mind making difficult decisions

- * think it is more important to be right than liked ... (p.18).

If you are a feeler you probably:

- *consider a "good decision" one that takes others' feelings into account.

...

- * will overextend yourself meeting other people's needs; you'll do almost anything to accommodate others, even at the expense of your own comfort.

- * ...

- * prefer harmony over clarity; you are embarrassed by conflict in groups or family gatherings and will try to avoid it ... or smother it with love (p. 19).

Table 8 Thinking/Feeling Table of Frequencies

	Percents of Total		Total	N
	F	T		
NR	30.00	24.00	54.00	27
R	18.00	28.00	46.00	23
Total	48.00	52.00	100.00	50
N	24	26	50	

Fourteen percent of the shelter sample had F as the Dominant Function as opposed to 35 % of the general female population (Myers & McCaulley, 1985). Twenty-eight percent of the shelter sample had T as the Dominant Function versus 19% in the general female population. It would appear that it serves a battered woman well to have thinking as a dominant function who can objectively analyze her situation, her feelings, and make a logical decision to come to the shelter. If a woman is the traditional F, the caretaker of the family's emotional needs, it would appear it is more difficult to make the decision to leave an abusive relationship even temporarily. This work supports the finding of Hader (1983) in her study which indicated that the typologies of battered women indicated that they had a strong need to please. After making it to the shelter, however, it didn't make a difference since the thinking/feeling function did not predict whether

the woman would return or not return.

An interesting finding in this Myers-Briggs data analysis was that 24% of the Ss were ISFJs. ISFJs comprise only $\pm 10\%$ of the general female population (Myers & McCaulley, 1985). Forty-one percent of the shelter ISFJs did not return to the abuser and fifty-eight did return. ISFJs are described as having a high sense of duty; they take obligations seriously, and are more prone than other types to become the doormats in a marriage (Kroeger & Thuesen, 1988). This theory supports the finding of Bratslavsky (1984) that battered women were more likely to be conventional in their ideas and actions and more likely to be submissive to authority in general and their husbands in particular.

SECOND RESEARCH HYPOTHESIS

The second research hypothesis was that women who chose not to return to the battering relationship would score significantly higher on the CPI-R scales of Dominance (Do) and Independence (In) and significantly lower on the Femininity/Masculinity (F/M) scale than those who chose to return to the battering relationship.

The combined mean scores for the nonreturn and return groups on the CPI-R were between 40 and 52. The scores for the return group were not significantly different but did indicate a slightly lower trend (see Appendix C).

Dominance means ruling, governing, controlling,

having or exerting authority (Webster, 1989). A low scale interpretation on the Do scale reads, "She is not strongly dominant and tends to prefer a nonassertive, participative role. She may resist change and generally avoids leadership responsibilities. She is likely to appear dependent and may have difficulty making direct requests, sometimes exhibiting passive-aggressive behavior" (McAllister, 1988, p.8).

Independent means not influenced or controlled by others; thinking or acting for one's self (Webster, 1989). A low scale interpretation on this scale reads, "Frequently she may lack confidence in herself and her decisions and may hesitate to assert herself or take independent action. She is not highly competitive, preferring instead to emphasize cooperation and affiliation with others" (McAllister, 1988, p.12).

The person who receives a low score on the F/M scale is assumed to be self sufficient, emotionally independent, able to live with the emotional consequences of her/his own behavior, and more toughminded than sensitive.

These three scales were selected for use because they all have to do with power. There have been many definitions of power; a common concept of male power is linked with the ability to control and limit the actions of other people by using one's own force or authority (Miller, in Goodrich, 1991). Miller continues by saying that there is a traditional myth that women do not and should not have power.

Additionally, there is a notion that women do not need power. Women are comfortable with power only if they use it in the service of others, that is, to use personal power to empower others or to foster or nurture the growth of others.

Bratslavsky's study supported her theory that to the extent that battered women endorsed an autocratic family ideology they were prevented from acting meaningfully, purposefully, and responsibly in their own behalf. Gilligan (1982) described women as having an ethical sense which is oriented toward relationships with a moral imperative to care for others at the expense of self. So it appeared to follow logically that women who returned to the abusive relationship would score lower on the Do and In scales and higher on the F/M scale if they were hesitant to exercise power in what would seemingly be their own best interest - to not return to the abuser. Since the scores of both groups were well within the limits of normal range, there were obviously other variables interacting with their decisions to return or not return.

THIRD RESEARCH HYPOTHESIS

The third research hypothesis was that those who chose not to return to the battering relationship would score significantly higher on the Constructive Thinking Inventory scales of Emotional Coping (EC) and Behavioral Coping (BC) and significantly lower on the scale of Naive Optimism (NO).

Seymour Epstein certainly seems to have a point when he reflects that how a people manage their emotions is a major factor in how effectively they live their lives. The two scales of Emotional Coping and Behavioral Coping divide the general concept of 'coping' into two domains: the inner world of emotions and thoughts (emotional coping) and the outer world of events (behavioral coping). These two scales indicated that there was indeed a significant difference in the coping abilities of those Ss who returned to the abuser and those who did not return. There was not a significant difference between the two groups on the scale of Naive Optimism.

Table 9 Constructive Thinking Inventory Group Means

	Emotional Coping	Behavioral Coping	Naive Optimism
Return Group	77.17	90.04	48.21
Nonreturn Group	86.55	96.22	48.74
Total Sample Group	82.24	93.38	48.50
Normative Group	77.64	86.60	45.34

One component of the emotional coping scale involves the concept of approval. High scorers on this scale are self-accepting and not sensitive to disapproval. Hader (1983), in her study of the characteristics of battered women, found that the typology of battered women, summarized by the 'need to

please,' indicated the need to be good, to be obedient, and to seek approval. Other researchers (Pagelow, 1982; Straus, 1980) have found that a woman who chooses to leave her abuser risks the disapproval of her family, her clergyperson, and certainly her abusing partner. The finding that women who choose to leave their abusers have a significantly higher score on emotional coping would appear to indicate that approval from and by others is no longer a factor in their decision-making process.

The Behavioral Coping Scale has component parts which include maintaining an optimistic approach to life, being action oriented, and focusing energy on planning and carrying out effective action. Bratslavsky (1984), in her study based on Viktor Frankl's existential vacuum, found that since battered women found themselves in a situation combining physical abuse with a personal sense of meaninglessness and purposelessness, they no longer knew what they should or must do. This state of existential vacuum is mutually exclusive with an optimistic approach to life and being action oriented. It is interesting to reflect that women who were choosing to return to their primary relationship - supposedly an occasion of joy - scored lower on the behavioral coping scale, which contains this component of optimism, than women who chose to end their relationship. Zielke (1984) also concluded that battered women had little experience in believing that they had much control over their lives; they believed that life was

largely determined by external forces such as luck, fate, and/or powerful others. Again, this finding is not conducive to productive living. Given the significant difference between those women who chose to return to the abusive relationship and those who did not return on the scales of Emotional Coping and Behavioral Coping, it may be that those who did not return are in the synthesis stage of development (Downing & Roush, 1985) in which choices are made from well-defined personal values and appropriate responses are made to experiences of oppression and discrimination.

These twin findings also support Malloy's (1986) investigative study on which variables played a significant role in the decision to return or not return. The women who did not return to the abuser were more able to tolerate not having a partner and more able to not blame themselves - both items having to do with emotional coping. These same women were also more able to keep busy - a component part of behavioral coping.

There was not a significant difference between the two groups on the scale of Naive Optimism. While both mean scores were higher than the normative group of college students, the results indicated, that on the average, these subjects did not engage in simplistic, stereotypic thinking and did not grossly overgeneralize following a positive outcome. Accessing across the multi-modal therapy dimensions it is interesting to remember at this point that 82% of the

subjects indicated the Sensing preference on the MBTI and 44% of those had Sensing as the dominant function. Isabel Briggs Myers (1986) writes that Sensing types are intensely aware of the external environment. SJ people are reputed to be the ultimate realists and they comprised 54% of this sample. It logically follows that they are not naive optimists.

FOURTH RESEARCH HYPOTHESIS

The fourth research hypothesis was that women who had previously left the batterer zero, one, or two times would return to the abusive relationship to a significantly greater degree than would women who had previously left three or more times.

Summary statistics reveal that the average number of times Ss who return to their abusers have previously separated from them is 1.91 times. Ss who do not return to their abusers have previously separated from them 2.25 times. This is not a significant difference.

When the times previously separated variable is made into a dichotomous variable with 0, 1, or 2 equaling '1' and 3 or more times separated equaling '2', the majority of those who return have previously separated 2 or fewer times. Still, the numbers are not statistically significant. Yet the finding with this variable emphasizes the vital importance of assessing across the BASIC-ID. Dobash and Dobash (1979) were

quoted earlier in this dissertation as stating "... the twin questions of why women stay in or fail to leave violent relationships tend to a large extent to miss the point: they [assume] ... that a woman engages in either one behavior or the other. Most women engage in both..." (p.144). The truth of this statement became abundantly clear during this research data gathering period of 18 months.

Sullivan (1991), in her own review of literature on battered women, again cited the documented research which asserts that one major reason women return to the abuser is lack of access to community resources. Sullivan states that if we are to understand why women chose to stay in an abusive relationship, it is crucial to understand what happens when they try to leave. Gondolf (1988) studied more than 6,000 residents of 50 battered women shelters. His detailed research led him to conclude that battered women "are in fact 'survivors,' in that they assertively and persistently attempt to do something about their abuse. They contact a variety of help sources where one would expect to find assistance" (p.93).

In addition to community resources, battered women need support from their families, support from their churches, an ability to realistically assess the chances that their battering partner will change, a safe place to live, and a shelter to which she can return if her reconciliation does not work.

When this research was in the planning stage, the dependent variable 'to return or not return' was, in retrospect, deceptively simple. The difficulty began a few month into data gathering.

Case 2 was ready to return to her abuser when her oldest child revealed sexual abuse perpetrated by the abuser. Case 2 did not return, not because of her own abuse, but because of the abuse of her daughter.

Case 13 should have hypothetically returned since she had separated previously only once and had high and low scores in the prescribed places on the personality inventories. But she was an ISTJ on the Myers-Briggs - the most impersonal of all the types; she had a son in California who sent her a plane ticket to come there to live, and she had a marketable skill with which she could earn a living. She did not return.

Case 39 came to the shelter, leaving her teen-age son with her husband. Her husband eventually dropped the son off at the S's job, forcing her to leave the shelter since we do not have the facilities necessary to house teenage boys. So Case 39 was marked as returning to her abuser. Six months later she was back and is now on her way to permanent housing apart from her abuser. She made other arrangements for her son while she was in the shelter the second time. She initially returned to her abuser (and was so scored in this research) because at that point in time her only alternative was to live

in the streets with her son - a choice she chose not to make. But she never quit planning how to leave and how to make the move work the next time. She was engaging in both returning and leaving behaviors at the same time.

Case 44 was able to get permanent low income housing. She had a grant to go to school and excellent community support. Yet three months later she tossed it all aside and returned to her abuser. A decision had to be made concerning a cut-off point for changing the R-NR status of a subject. It was arbitrarily decided to make it one month.

Case 43 by this TPS variable should have not returned. Her partner upped the ante by making an appointment for counseling and going to the first counseling session. Previously he had agreed to go into AA (the third time), get baptized (the fourth time) and now he agreed to couples counseling. Case 43 also had multiple sclerosis and was in her forties. Her MBTI was ISFJ - the type who is known for her loyalty, dependability, and stability. Using her SJ, she apparently assessed that at age 43, with MS, in all likelihood her chances of another serious relationship were slim. She returned to her abuser to give him another chance.

Lazarus (1982) makes the point that it is imperative to keep the BASIC-ID current. When one studies the independent variables of this sample, one is studying a set of variables as they exist at that point in time. The R-NR variable was the most interesting to study because at times it

seemed to change daily. It was the variable most influenced by other events, happenings, resources, and seemingly random occurrences as well as the decisions and internal determinants of the S herself. The necessity of keeping current with the clients life was epitomized by this variable.

SUGGESTIONS FOR FUTURE RESEARCH

One problem with this research endeavor was that the combination of inventories required approximately three hours to complete. When women come to the shelter, completing inventories is understandably not at the top of their priority list of things to do. A future researcher would be well advised to use inventories which require less time from the subject.

This caveat notwithstanding, one of the research inventories should still be the Myers-Briggs Type Indicator. One finding, previously discussed, was that more T women than F women came to the shelter. Since the Federal Bureau of Investigation crime statistics show that battery crosses all education and social/economic class lines, one would make an inferential assumption that more Feeling women are battered than Thinking women simply because there are more Feeling women.

Another interesting discovery was that 56% of the women who completed the inventories were Introverts; this is more than twice the national average of Introverts in the

general population. Of this 56% of shelter Introverts, 46% returned to the abuser and 54% did not return. Introverts are described in Gifts Differing (Myers & Myers, 1980) as not being able to live life until they understand it; they defend themselves against external claims so that they are freed up to live quietly in their inner world of ideas and understanding. Living with a batterer who creates chaos in the life of his abused spouse/girlfriend and who hovers over her every action and thought, allowing her no privacy at all, would be unbearable for an introvert. Analyzed from this point of view, it would not be surprising that an intensely private introvert, who customarily has few relationships, would leave her primary relationship when it is so completely unsatisfactory.

Future researchers could determine whether these twin findings of more Thinkers and Introverts in this particular shelter was unusual or if it is indicative of normal shelter populations. If it is indicative of a normal shelter population, it might be possible to use this information in conjunction with other information to predict which women will return to the abuser and which women will not return to the abuser.

According to Epstein and Katz (1992) there are two reasons for constructing a new test instrument. The first reason is that it fills a void in that it measures something that has not been previously measured; the second reason is

that it measures the same thing as other inventories but does a better job.

Epstein has presented strong evidence for his concept of a general coping ability. A deeper insight into the ways in which these two groups of women construe and respond to their emotional experiences would contribute new valuable information on this high-risk population as well as helping to predict which women will return to the abuser and which ones will not. Since two of the three scales used in this research indicated a statistically significant difference in the thinking patterns between women who were returning to the abuser and women who were not returning, future researchers should explore the other scales on the CTI in conjunction with these two scales.

As the shelter counselor it was this researcher's job to provide therapy for the shelter residents. During the course of this therapy it became increasingly clear that the vast majority of those residents who had returned three or more times to the abuser had two experiences in common: the first was the experience of being battered and the second experience was childhood incest. Recent researchers (Wardell, 1990; Whetsell, 1990) have concluded that women sexually abused as children are more likely to return to their abusers and be abused to a greater extent than women who were not sexually abused as children. Given the present finding that battered women who return are significantly different on the

scales of Emotional Coping and Behavioral Coping future researchers could focus on how being survivors of incest and battering have shaped and reshaped the cognitive and emotional worlds of the individuals involved and impacted on their decision-making process.

Chapter II of this dissertation describes the article of Sageeta Singg (1984) entitled "Toward an Understanding of Post-Traumatic Stress Disorders." Approximately two years have elapsed since that portion of this dissertation was written. In the intervening time many articles have been written that describe battered women as being the primary population suffering from this condition which is induced by an external event of an overwhelmingly painful nature. An on-line search at the college library found five dissertations done within the last two years which verified that battered women, as a whole, suffer varying degrees of PTSD. Since PTSD presents with a variety of symptoms, future research could focus on an effective measure to gauge whether there is a pattern of PTSD common to battered women and whether or not this pattern has any predictive power concerning the decision to return or not return.

DEMOGRAPHIC INFORMATION SHEET

ID Number _____ Age _____ Race _____

Married/Not Married _____

What is the length of your relationship? _____

Is this your first time in a shelter? _____

How many times have you previously separated from your
husband/boyfriend? _____

Did you file charges this time? _____

Assault & Battery _____ Maiming _____

Protective Order _____

Other _____

Did you require medical care this time? _____

Are you currently employed? _____

Do you receive Aid to Dependent Children? _____

Are you in Section 8 housing? _____

What is the highest grade you completed in school? _____

CONSENT FORM

This consent form is to request your voluntary participation in a study to be conducted by Marti Grenier in partial fulfillment of the requirements for a doctoral degree in counseling at the College of William and Mary. Please read the following information carefully and sign the section marked "Informed and Voluntary Consent to Participate" if you are willing to participate in this study.

Purpose of the Study

This purpose of this study is to ascertain if distinctive patterns will emerge between those women choosing to return to their partner and those women who choose not to return.

Description of the Study

Participating women will be asked to individually complete a brief biographical information, the California Psychological Inventory, the Myers-Briggs Type Indicator, and the Constructive Thinking Inventory. The combined inventories will require approximately two hours to complete. Results of the inventories will be made available to the participants at the conclusion of the study.

Assurance of Confidentiality

All data collected in this study will be kept in confidence. Participants will receive a numbered envelope containing the three inventories and the biographical information sheet. Participants will need to make note of this number if they plan to request their results at a later date. This researcher will keep the number and the participant's first name with last initial until the participant has left the shelter and has either returned or not returned to her previous relationship. At that time the name will be deleted from the data and replaced with a 'R' to designate the decision to return and 'NR' to designate the decision to not return. This researcher will have sole access to the number combined with the name. Only group data will be reported in this study.

Assurance of Voluntary Participation

Participation in this study is strictly voluntary. The right of the individual to decline to participate or to withdraw at any time is guaranteed and will not have any negative impact on you or services available to you. Should the inventories cause any psychological stress to the individual, one or both of the following persons should be contacted:

Dr. Charles Matthews
Licensed Professional Counselor
Graduate School of Education
College of William and Mary

Williamsburg, VA 23185
(804) 254-4434

or

Marti Grenier
Resident in Training to become a Licensed
Professional Counselor
240 Chapel Street
Hampton, VA 23669
(804) 722-2261 or 723-7774

If you have any complaints about the research, you may
contact:

Dr. Thomas Ward
College of William and Mary
Graduate School of Education
Williamsburg, VA 23185
(804) 221-2343

Availability of Results

Individual results may be obtained by calling the investigator, providing the number assigned to your set of inventories, and scheduling an appointment. This researcher has been trained by the College of William and Mary to interpret the instruments utilized in this research and to discuss with the volunteer subject the meaning of the scores as they apply to her. Any problems that may arise from the interpretation will be dealt with by this researcher, Marti Grenier, or Dr. Charles Matthews, whose names and phone numbers are above. Please allow at least three weeks for this researcher to interpret your inventories.

Informed and Voluntary Consent to Participate

I have been informed and agree to participate in the study outlined above. My right to decline to participate or to withdraw at any time has been guaranteed.

Volunteer's Signature

Date

Phone Number

CLIENT INTAKE

PART I. IMMEDIATE INTAKE: COMPLETE UPON ENTRY

A. CLIENT _____ INTAKE WORKER: _____

1. NAME: _____ INTAKE DATE: _____

a. DATE OF BIRTH: _____ (age _____) SSN: _____ - _____ - _____

b. RACE/ETHNICITY: (CIRCLE) VPCDV CLIENT #: _____
(to be assigned)

1. WHITE 3. HISPANIC 5. ASIAN
2. BLACK 4. NATIVE AMERICAN 6. OTHER _____

2. ADDRESS _____
(street) (apt #) (home phone)

_____ (city) (state) (work phone) (hours)

3. EMERGENCY CONTACT: _____
(name) (work phone) (home phone)

_____ (relationship to client) (address) (city) (state) (zip)

4. IF CLIENT IS RECEIVING MEDICAL TREATMENT/TAKING MEDICATION, COMPLETE:

PHYSICIAN	MEDICAL PROBLEM	TYPE OF TREATMENT	MEDICATION/ FREQUENCY
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

5. IS CLIENT PREGNANT? NO YES - NUMBER OF MONTHS _____

6. IS CLIENT HANDICAPPED? NO YES -
EXPLAIN _____

I CERTIFY THAT I HAVE TURNED OVER MY MEDICATIONS, AND THOSE OF MY CHILDREN, PRESCRIBED AND OVER-THE-COUNTER, FOR SAFE KEEPING.

SIGNATURE REQUIRED: _____
(CLIENT'S SIGNATURE)

_____ (VOLUNTEER/STAFF WITNESS)

7. CLIENT DESCRIPTION: (FOR IDENTIFICATION PURPOSES IN CASE OF EMERGENCY)

a. HEIGHT:_____ b. WEIGHT_____ c. HAIR COLOR\STYLE:_____

d. SKIN COLOR:_____ e. EYE COLOR: _____
(light) (medium) (dark)

f. IDENTIFYING FEATURES: _____

8. DESCRIPTION OF CLIENT'S AUTOMOBILE(S):

a. MAKE/MODEL/YEAR: _____

b. COLOR:_____ LICENSE #/STATE _____

c. TITLE HOLDER: _____

9. PERSONAL BELONGINGS TURNED OVER TO VPCDV FOR SAFEKEEPING:
(DESCRIBE):

SIGNATURE REQUIRED: _____
(client signature) (date)

(volunteer/staff witness) (date)

B. ABUSER

1. NAME: _____

a. DATE OF BIRTH: _____ SS# _____

b. RACE/ETHNICITY: (CIRCLE)

1. WHITE
2. BLACK

3. HISPANIC
4. NATIVE AMERICAN

5. ASIAN
6. OTHER

2. ADDRESS: (IF NOT CLIENTS'): _____
(street) (apt #)

3. CURRENT EMPLOYMENT

(name) (address)

4. ABUSER'S DESCRIPTION
a. HEIGHT_____ b. WEIGHT_____ c. HAIR COLOR/STYLE_____
d. SKIN COLOR: _____ e. EYE COLOR_____
(light) (medium) (dark)
f. IDENTIFYING FEATURES: _____
5. DESCRIPTION OF ABUSER'S AUTOMOBILES:
a. MAKE/MODEL/YEAR_____
b. COLOR:_____ LICENSE #/STATE_____
c. TITLE HOLDER_____
6. ABUSER OWNS/HAS ACCESS TO WEAPONS: YES___ NO___ TYPE_____
ABUSER HAS BEEN PUBLICLY VIOLENT? YES___ NO___
ABUSER KNOWS/SUSPECT LOCATION OF SHELTER? YES___ NO___

CLIENT CONTRACT

I WILL KEEP THE LOCATION OF THE VPCDV ABSOLUTELY SECRET FROM EVERYONE
I WILL NOT DISCUSS OTHER CLIENTS WITH ANYONE.
I WILL PARK MY CAR OUT OF SIGHT OF THE SHELTER.
I WILL NOT BE DROPPED OFF OR PICKED UP WITHIN VIEW OF THE SHELTER
THE SHELTER IS A REFUSE FROM VIOLENCE. THEREFORE I WILL NOT PARTICIPATE
IN PHYSICAL ABUSE, VERBAL ABUSE, SPANKING, NAME CALLING, OR THREATS.
I UNDERSTAND THAT WEAPONS, ALCOHOL, AND ILLEGAL DRUGS ARE FORBIDDEN AT
THE SHELTER. I WILL NOT BE UNDER THE INFLUENCE OF ALCOHOL/DRUGS WHILE
IN VPCDV'S SHELTER.
I UNDERSTAND THAT STEALING AND SEXUAL ACTIVITY ARE FORBIDDEN AT THE
SHELTER.
I WILL NOT SMOKE UPSTAIRS.

** I WILL BE ASKED TO LEAVE IMMEDIATELY IF I BREAK ANY OF THESE RULES!!

SIGNATURE REQUIRED:

(client's signature and date)

(volunteer/staff signature and date)

RESIDENTIAL LIVING CONTRACT

THE VPCDV SHELTER IS A SHORT-TERM REFUGE FOR WOMEN WHO ARE EXPERIENCING VIOLENCE IN THEIR HOMES. THE PROGRAM EXISTS TO PROVIDE A SAFE PLACE FOR THE CLIENT AND HER CHILDREN WHILE THE CLIENT REGAINS A SENSE OF PERSONAL STRENGTH AND DEVELOPS A PLAN OF ACTION.

VPCDV AGREES TO PROVIDE, AS RESOURCES PERMIT:

1. SHELTER, COOKING, AND LAUNDRY FACILITIES.
2. FOOD AND CLOTHING FOR RESIDENTS WITHOUT FINANCIAL RESOURCES.
3. INFORMATION, REFERRAL, AND SUPPORT SERVICES.

VPCDV REQUIRES A FEE OF \$0 - \$10 PER NIGHT OF SHELTER. RESIDENTS ARE REQUIRED TO DONATE SERVICES AND TIME DURING THEIR STAY AT THE SHELTER.

I WANT THE ABUSIVE BEHAVIOR IN MY FAMILY TO STOP, AND I AM WILLING TO WORK TOWARDS THAT GOAL. I AGREE TO DEVELOP A PLAN OF ACTION, REGARDLESS OF WHETHER I STAY IN THE RELATIONSHIP OR CHOOSE TO LEAVE. I HAVE READ AND UNDERSTAND THE GUIDELINES FOR SHELTER RESIDENTS AND AGREE TO COMPLY WITH THESE GUIDELINES. MY LENGTH OF STAY IS DETERMINED ON A WEEKLY BASIS. BASED ON NEED, MY PROGRESS TOWARDS MY GOAL, AND ADHERENCE TO THE SHELTER GUIDELINES. I UNDERSTAND THAT I WILL MEET WITH THE CLIENT SERVICES COORDINATOR TO DISCUSS MY PROGRESS.

SIGNATURE REQUIRED: _____

(client signature and date)

(volunteer/staff and date)

RELEASE FROM LIABILITY

I, _____, hereby release the volunteers, staff, Board of Directors, and the Virginia Peninsula Council on Domestic Violence itself from any and all liability regarding my stay, and that of my children, at the shelter, at other VPCDV sites, or in conjunction with VPCDV programs.

SIGNATURE REQUIRED: _____

(client signature and date)

(volunteer/staff signature and date)

Page 5 of 7

7. DID YOU RECEIVE TREATMENT AFTER MOST RECENT INCIDENT?

WHERE: _____ WHEN: _____

8. WERE YOU ABUSED IN YOUR CHILDHOOD?

a. YES

b. NO

INCOME/RESOURCES (AMOUNT PER YEAR)

	CLIENT	SPOUSE	OTHER	TOTAL
1. WAGES.....	_____	_____	_____	_____
TOTAL ANNUAL.....	_____	_____	_____	_____
2. PUBLIC AID				
1. ADC.....	_____	_____	_____	_____
2. FOOD STAMPS.....	_____	_____	_____	_____
3. MEDICARE.....	_____	_____	_____	_____
4. MEDICAID.....	_____	_____	_____	_____
5. MEDICAL AID-NO GRANT	_____	_____	_____	_____
6. OTHER (EXPLAIN).....	_____	_____	_____	_____
3. UNEMPLOYMENT INSURANCE..	_____	_____	_____	_____
4. WORKER'S COMPENSATION...	_____	_____	_____	_____
5. ALIMONY.....	_____	_____	_____	_____
6. CHILD SUPPORT.....	_____	_____	_____	_____
.....	_____	_____	_____	_____
.....	_____	_____	_____	_____
7. SOCIAL SECURITY				
a. SOCIAL SEC.....	_____	_____	_____	_____
b. SOCIAL SEC. DISAB...	_____	_____	_____	_____
8. VETERAN'S BENEFITS.....	_____	_____	_____	_____
9. OTHER (EXPLAIN).....	_____	_____	_____	_____
10. WHAT OTHER RESOURCES DOES THE CLIENT HAVE?				
a. CASH ON HAND	_____			
b. ANTICIPATED INCOME	_____			
c. CREDIT CARDS	_____			
d. REAL ESTATE	_____			
e. FRIENDS/RELATIVES WHO CAN HELP	_____			
f. OTHER AGENCIES OR ORGANIZATIONS	_____			
g. OTHER	_____			

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California Psychological Inventory

1 page

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